

114TH CONGRESS
2D SESSION

S. 2572

To make demonstration grants to eligible local educational agencies or consortia of eligible local educational agencies for the purpose of increasing the numbers of school nurses in public elementary schools and secondary schools.

IN THE SENATE OF THE UNITED STATES

FEBRUARY 24, 2016

Mr. TESTER (for himself, Ms. STABENOW, Mr. REED, and Mr. PETERS) introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

A BILL

To make demonstration grants to eligible local educational agencies or consortia of eligible local educational agencies for the purpose of increasing the numbers of school nurses in public elementary schools and secondary schools.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Nurses for Under-
5 Resourced Schools Everywhere Act” or the “NURSE
6 Act”.

1 **SEC. 2. FINDINGS.**

2 Congress finds the following:

3 (1) The National Association of School Nurses
4 identifies schools as primary locations to address
5 student health issues, since a school nurse is the
6 health care provider that many students see on the
7 most regular basis.

8 (2) The American Academy of Pediatrics em-
9 phasizes the crucial role of school nurses in the
10 seamless provision of comprehensive health services
11 to children and youth, as well as in the development
12 of a coordinated school health program.

13 (3) The school nurse functions as a leader and
14 the coordinator of the school health services team,
15 facilitating access to a medical home for each child
16 and supporting academic achievement.

17 (4) School nurses promote wellness and disease
18 prevention to improve health outcomes for our Na-
19 tion's children. In addition, school nurses perform
20 early intervention services such as periodic assess-
21 ments for vision, hearing, and dental problems, in an
22 effort to remove barriers to learning.

23 (5) The American Federation of Teachers has
24 called for a nurse in every school, as nurses are
25 front-line workers that address an array of health

1 needs and their presence in a school can help to im-
2 prove student learning.

3 (6) National data indicate only 45 percent of
4 public schools have a school nurse all day, every day,
5 while another 30 percent of schools have a school
6 nurse who only works part-time in one or more
7 schools.

8 (7) The National Association of School Nurses
9 has reported that medication administration to stu-
10 dents is one of the most common health-related ac-
11 tivities performed in school. As more chronically ill
12 and medically unstable children enter the school sys-
13 tem each year, the medical factors that promote and
14 support their academic success increase, including
15 the need for medications that enhance overall health
16 or stabilize chronic conditions.

17 (8) Statistics from the National Center for
18 Education Statistics indicate that 15 to 18 percent
19 of the 52,000,000 students who currently spend
20 their day in school have a chronic health condition.

21 (9) According to the American Academy of Pe-
22 diatrics, students today face increased social and
23 emotional issues, which enhance the need for preven-
24 tive services and interventions for acute and chronic
25 health issues. School nurses are actively engaged

1 members of school-based mental health teams and
2 spend nearly 32 percent of their time providing men-
3 tal health services, including universal and targeted
4 interventions, screenings to identify early warning
5 signs and provide referrals to medical providers, and
6 crisis planning.

7 (10) In 2013, the Bureau of the Census re-
8 ported 7.6 percent of children under the age of 19,
9 which equals 78,000,000 children under the age of
10 19, were without health insurance. Data show that
11 uninsured children achieve lower educational out-
12 comes than those with health coverage. Children who
13 cannot afford to see a medical provider miss more
14 days of school, experience increased severity of ill-
15 ness, and suffer from disparities in health.

16 (11) More than 1,600,000 children experience
17 homelessness each year in the United States. Home-
18 less children develop increased rates of acute and
19 chronic health conditions, and the stress of their liv-
20 ing situation can negatively affect their development
21 and ability to learn. As a result, schools have become
22 the primary access to health care for many children
23 and adolescents. School nurses serve on the front
24 lines as a safety net for the Nation's most vulnerable
25 children.

1 (12) Communicable and infectious diseases ac-
 2 count for millions of school days lost each year.
 3 Data illustrate that when students have access to a
 4 registered nurse in school, immunization rates in-
 5 crease.

6 (13) A 2011 study showed that a school nurse
 7 in the building saves principals, teachers, and cler-
 8 ical staff a considerable amount of time that they
 9 would have spent addressing health concerns of stu-
 10 dents, including saving principals almost an hour a
 11 day, saving teachers almost 20 minutes a day, and
 12 saving clerical staff more than 45 minutes a day.
 13 This would amount to a savings of about 13 hours
 14 per day in the aggregate for such school personnel.

15 **SEC. 3. INCREASING THE NUMBER OF SCHOOL NURSES.**

16 (a) DEFINITIONS.—In this section:

17 (1) ESEA TERMS.—The terms “elementary
 18 school”, “local educational agency”, “secondary
 19 school”, and “State educational agency” have the
 20 meanings given to the terms in section 8101 of the
 21 Elementary and Secondary Education Act of 1965.

22 (2) ACUITY.—The term “acuity”, when used
 23 with respect to a level, means the level of a patient’s
 24 sickness, such as a chronic condition, which influ-
 25 ences the need for nursing care.

1 (3) ELIGIBLE ENTITY.—The term “eligible enti-
2 ty” means—

3 (A) a local educational agency in which not
4 less than 20 percent of the children are eligible
5 to participate in the school lunch program es-
6 tablished under the Richard B. Russell National
7 School Lunch Act (42 U.S.C. 1751 et seq.);

8 (B) a consortium of local educational agen-
9 cies described in subparagraph (A); or

10 (C) a State educational agency in consor-
11 tium with local educational agencies described
12 in subparagraph (A).

13 (4) HIGH-NEED LOCAL EDUCATIONAL AGEN-
14 CY.—The term “high-need local educational agency”
15 means a local educational agency described in para-
16 graph (3)(A)—

17 (A) that serves not fewer than 15,000 chil-
18 dren who are eligible to participate in the pro-
19 gram described in such paragraph; or

20 (B) for which not less than 40 percent of
21 the children served by the agency are eligible to
22 participate in the program described in such
23 paragraph.

24 (5) NURSE.—The term “nurse” means a reg-
25 istered nurse, as defined under State law.

1 (6) SECRETARY.—The term “Secretary” means
2 the Secretary of Education.

3 (7) WORKLOAD.—The term “workload”, when
4 used with respect to a nurse, means the amount of
5 time the nurse takes to provide care and complete
6 the other tasks for which the nurse is responsible.

7 (b) DEMONSTRATION GRANT PROGRAM AUTHOR-
8 IZED.—

9 (1) IN GENERAL.—From amounts appropriated
10 to carry out this section, the Secretary of Education
11 shall award demonstration grants, on a competitive
12 basis, to eligible entities to pay the Federal share of
13 the costs of increasing the number of school nurses
14 in the public elementary schools and secondary
15 schools served by the eligible entity, which may in-
16 clude hiring a school nurse to serve schools in mul-
17 tiple school districts.

18 (2) SEAS.—In the case of an eligible entity de-
19 scribed in subsection (a)(3)(C) that receives a grant
20 under paragraph (1), such entity shall use amounts
21 received under the grant to award subgrants to the
22 local education agencies that are members of the en-
23 tity, and reserve not more than 10 percent of such
24 grant funds to support statewide activities to meet
25 a variety of health needs, which may include hiring

1 a nurse to provide training and technical assistance
 2 to schools statewide that meet the criteria estab-
 3 lished in subsection (d)(2)(A).

4 (c) APPLICATIONS.—

5 (1) IN GENERAL.—An eligible entity desiring a
 6 grant under this section shall submit to the Sec-
 7 retary an application at such time, in such manner,
 8 and containing such information as the Secretary
 9 may require.

10 (2) CONTENTS.—Each application submitted
 11 under paragraph (1) shall include information with
 12 respect to the current (as of the date of application)
 13 number of school nurses, student health acuity lev-
 14 els, and workload of school nurses in each of the
 15 public elementary schools and secondary schools
 16 served by the eligible entity.

17 (d) PRIORITY.—In awarding grants under this sec-
 18 tion, the Secretary shall give priority to each application
 19 submitted by an eligible entity that—

20 (1) is a high-need local educational agency, a
 21 consortium composed of high-need local education
 22 agencies, or a State educational agency in consor-
 23 tium with high-need local education agencies; and

24 (2) demonstrates—

1 (A) the greatest need for new or additional
2 nursing services among students in the public
3 elementary schools and secondary schools
4 served by the agency or consortium; or

5 (B) that the eligible entity does not have
6 a school nurse in any of the public elementary
7 schools and secondary schools served by the
8 local education agency or the consortium-mem-
9 ber local education agencies.

10 (e) FEDERAL SHARE; NON-FEDERAL SHARE.—

11 (1) FEDERAL SHARE.—The Federal share of a
12 grant under this section—

13 (A) shall not exceed 75 percent for each
14 year of the grant; and

15 (B) in the case of a multiyear grant, shall
16 decrease for each succeeding year of the grant,
17 in order to ensure the continuity of the in-
18 creased hiring level of school nurses using State
19 or local sources of funding following the conclu-
20 sion of the grant.

21 (2) NON-FEDERAL SHARE.—The non-Federal
22 share of a grant under this section may be in cash
23 or in kind, and may be provided from State re-
24 sources, local resources, contributions from private
25 organizations, or a combination thereof.

1 (3) WAIVER.—The Secretary may waive or re-
 2 duce the non-Federal share of an eligible entity re-
 3 ceiving a grant under this section if the eligible enti-
 4 ty demonstrates an economic hardship.

5 (f) REPORT.—Not later than 2 years after the date
 6 on which a grant is first made to a local educational agen-
 7 cy under this section, the Secretary shall submit to Con-
 8 gress a report on the results of the demonstration grant
 9 program carried out under this section, including an eval-
 10 uation of—

11 (1) the effectiveness of the program in increas-
 12 ing the number of school nurses; and

13 (2) the impact of any resulting enhanced health
 14 of students on learning, such as academic achieve-
 15 ment, attendance, and classroom time.

16 (g) AUTHORIZATION OF APPROPRIATIONS.—There
 17 are authorized to be appropriated to carry out this section
 18 such sums as may be necessary for each of fiscal years
 19 2017 through 2021.

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