

Electronic Health Records: An Essential School Nursing Tool for Supporting Student Health

Position Statement

NASN POSITION

It is the position of the National Association of School Nurses (NASN) that electronic health records software platforms (EHRs) are essential tools for all registered professional school nurses (hereinafter referred to as school nurses). EHRs that align with standards of 21st century nursing practice support school nurses' capacity to improve healthcare coordination, quality, safety, efficiency, effectiveness, and equity. These provisions enhance the potential for school-age youth to reach their full educational potential.

BACKGROUND AND RATIONALE

For the purposes of this position statement, the term EHR refers only to software platform systems designed specifically for school nursing that use the nursing process, standardized nursing language and data points, and established standards of confidentiality, security, and privacy set by the Health Information Portability and Accountability Act (HIPAA) and the Family Rights Educational Privacy Act (FERPA) (U.S. Department of Health & Human Services & U.S. Department of Education, 2019).

School nurses are accountable for recording and maintaining student health information and documenting nursing care in a manner that is timely, accurate, legible, complete, retrievable, and securely protected (NASN, 2020; Nicholson & Johnson, 2020). Documentation should follow the nursing process using standardized nursing language and data points, adhering to the same rigorous state-specific and federal standards of practice for professional nursing as in any other nursing setting (NASN, 2022). The most efficient, effective, safe, and secure method for managing student health information is through EHR utilization (Bergren & Maughan, 2019).

An effective EHR maintains secure legal student health records and enables efficient school nursing workflow, organized record keeping, error prevention, and information retrieval. Documentation that school nurses enter into an EHR produces usable data which can be monitored, gathered, extracted, compared, analyzed, and leveraged to track and measure trends and outcomes (Bergren & Maughan, 2019). EHR data can serve as the foundation for reports, program evaluation, quality improvement projects, evidence-based decision making, best practices implementation, advocacy, policy development, grants, and research (Bergren & Maughan, 2019; Guthrie, 2019; NASN, 2020). Translating EHR data into measurable evidence leads to more effective care to improve student health, reduce health-related barriers to learning, and support educational achievement (Centers for Medicare and Medicaid Services [CMS], 2023; Maughan et al., 2021; Nicholson & Johnson, 2020; Office of the National Coordinator for Health Information Technology [ONC], 2022; Stanislo, 2023).

Use of EHRs in the school setting is also advantageous in case management and care coordination efforts, particularly for students with complex health needs and chronic conditions (Dandridge, 2019; Davis et al., 2021; NASN, 2019; Nicholson & Johnson, 2020). With bidirectional interoperative EHRs, school nurses can efficiently retrieve student health information compiled in EHRs for exchange and communication with other healthcare professionals and healthcare institutions to meet the shared goal of improving student health (Nicholson & Johnson, 2020). As of 2021, most medical offices in the U.S. had adopted EHRs, with increasing rates of electronic information exchange with healthcare professionals outside of their practice (O'Donnell & Suresh, 2020; ONC, n.d.-a; ONC, n.d.-b). As integral members of the healthcare system serving school-age youth, school nurses must also have EHR functionality to efficiently send and receive health information with other healthcare professionals (NASN, 2019). This type of interprofessional communication and collaboration supports better clinical decision-

making and continuity of care that can potentially prevent health complications and related emergencies and hospitalization, thus improving health outcomes while lowering healthcare costs (Atasoy, 2019; Baker & Gance-Cleveland, 2021; Lowrey, 2020; ONC, 2022). EHR capabilities may also facilitate insurance and Medicaid coding, claiming, billing, and reimbursement to school districts for school nursing services, making EHRs a cost-effective investment (Lowrey, 2020; CMS, 2019).

School nursing participation on school district information technology committees is vital for determining school health EHR quality, usability, functionality, security, interoperability, and related policy, procedures, and professional development needs (NASN, 2019). EHR interoperability linkages can increase the ease of sharing school health data with state information exchange systems (HIE) and other public and population health entities (Dandridge, 2019; ONC, 2019a; ONC, 2019b). Community and broader population health monitoring and surveillance are enhanced through reporting aggregate school EHR data such as health screenings, immunization and vaccination status, communicable illness rates, chronic health disease prevalence, environmental exposures, and the impact of school nursing interventions (Baker et al., 2022; Dandridge, 2019; Davis et al., 2021; Kruse et al., 2018; Lowrey, 2020; Nicholson & Johnson, 2020; ONC, 2020). This information exchange is particularly critical during a pandemic or other public health emergencies (Baker et al., 2020). EHRs are a necessary tool for gathering robust national school health data to inform local, state, and national student health policy regarding school health best practices and equitable access to school nursing care (Bergren & Maughan, 2019; Nicholson & Johnson, 2020; Maughan et al., 2022; NASN, 2018; NASN, 2023a; NASN, 2023b).

Some school districts' educational/academic student information/management systems offer integrated health data modules for school nursing documentation. However, these systems are inadequate for school nursing clinical use when they do not apply the nursing process, do not use standardized nursing language and data points, and do not uphold requirements for student health information confidentiality, privacy, and security (Dandridge, 2019). It is unlikely that academic student information/management systems have the potential for secure interoperability with students' community-based healthcare professionals or public health agency EHRs (Dandridge, 2019).

EHRs are an essential tool for school nurses to efficiently and effectively manage health information to optimize student healthcare quality, safety, coordination, and to improve student population health. EHRs enhance 21st century school nursing practices to provide equitable, evidence-based, student-centered healthcare that enables school-age youth to reach their full educational potential.

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