

2.17.26 Written testimony for ASD School Board

Good evening,

This is Nancy Bale, long time school nurse in ASD.

Thank you for taking the time to listen to diverse testimony on proposed budget cuts at Anchorage School District. Mine will cover the cutting of 25 school nurse positions and the Regional Model solution. I firmly believe that implementation of a Regional Model in ASD is fraught with peril and a draconian solution to a problem that is solvable in other ways.

As you know, the policy of having each school employ a dedicated nurse (One Nurse/One School) to care for that school community has been solidly in place since the early part of this century. There are occasions when one nurse takes care of more than one school, for reasons related to workload, acuity and size. In all of these cases, the nurse is hired by and evaluated by the principal of one of the schools. The school nurse belongs to the educator's union (AEA) and must obtain a Type C Certificate from DEED to serve as part of the education team.

If a Regional Model is chosen for nursing care by a team of nurses for a larger number of schools, we do not yet know how hiring, managing, and evaluation of a school nurse will be conducted. The whole system of performance evaluation of nurses might have to be re-written. This has implications for our AEA contract.

In fact, implementation of the Regional Model is fraught with pitfalls. Policies and procedures written for nurses in home schools will need re-writing, logistics of what to do when one of the team nurses is absent would need to be established. A decision on who would organize the teams and run their daily/weekly/monthly calendar has not been made. We are already in the second half of the school year. Hiring of new nurse positions will be difficult until the scope of their practice and range of their duties is determined.

When it comes to duties, will the scope of each team nurse's practice extend to administrative duties, such as being a team lead, who runs team meetings, has allocative authorities, interacts with several principals, and performs other administrative duties. If med errors or other errors occur, will the team lead be the contact for them? Or Nursing Director? Again, this type of role is beyond our normal job description, and could stand in the way of hiring new nurses.

We are already well into the second half of the school year. Implementation of the Regional Model, a complex system of managing nurses requires careful, long-term planning. As we wait for a decision to be made on the budget, the setting up of a task force is delayed, making the ultimate work harder.

The costs of setting up and running a Regional Model have not been considered, but will be large. They have not been accounted for in the analysis of this model. Do you, as a school board member, even feel that you understand all the implications of such a model?

Here are a few of the costs and complications of a Regional Model that could occur, from my knowledge of it:

1. Costs of just simply doing the work of modifying policies and procedures – significant
2. Costs of legal analysis to determine if this model violates hiring, evaluating, and scope of practice features of our AEA contract – significant
3. Costs of additional funds needed to make this work - meaningful
 - a. Addenda for planners
 - b. Addenda for UAPs
 - c. Contract nurses for unstable, full care students
 - d. Per mile costs when nurses must drive between assignments
4. Costs of additional insurance needed by the district to cover harms done in the absence of a nurse – significant
5. Costs of litigation itself – significant.

Other reasons I oppose adopting a Regional Model

1. Although such a model will start with only RNs on the team, it will inevitably lead to a diminution of professional standards of care.
2. There is information from other jurisdictions that tried the model and could not make it safe and effective.
3. We can cope with cuts, without giving up the One Nurse/One School model. This is what our parents and our principals would say to do, if asked.
4. A Regional Model is inherently unsafe.

A modest proposal

I would like to suggest that the School Board, instead of immediately buying into a Regional Model, recommend a task force to study ways that loss of school nursing workforce can be handled under current guidelines and contract stipulations.

Such a task force could be formed immediately and do the needed in-depth analysis required. I will be going to Juneau to ask for more education money, but that will not be forthcoming quickly. Meanwhile, we can study other ways to absorb a loss of nursing workforce without abandoning One Nurse/One School. Ideally, with a new governor and legislature next year, education will finally become a priority for Alaska and we will never have to abandon the One Nurse/One School overall vision.

You may telephone me with any questions. 907-244-2510