



COUNCIL OF THE DISTRICT OF COLUMBIA

THE JOHN A. WILSON BUILDING
1350 PENNSYLVANIA AVENUE, N.W.
SUITE 102
WASHINGTON, D.C. 20004

ZACHARY PARKER
COUNCILMEMBER, WARD 5

COMMITTEE MEMBER
Facilities and Family Services
Health
Hospital and Health Equity
Housing
Transportation and the Environment

February 2, 2024

Nyasha Smith, Secretary
Council of the District of Columbia
1350 Pennsylvania Avenue NW
Washington, DC 20004

Dear Secretary Smith,

Today, I am introducing the Public School Health Services Amendment Act of 2024. Please find enclosed a signed copy of the legislation, which is co-introduced by Councilmember Christina Henderson who chairs the Committee on Health.

The Council's Committee on Health conducted performance oversight hearings on January 18 and 22, 2024 with DC Health which elevated several gaps in the District's nursing coverage for our public schools. With this legislation, I intend to address the gaps in health services for students across the District, and support DC Health in its work facilitating this care. The bill amends the requirement for minimum nursing coverage at public and public charter schools, requires all schools to have nursing coverage whether or not they participate in DC Health's School Health Services Program, and creates clearer guidelines for nursing coverage and reporting.

DC Health facilitates the School Health Services Program, which is responsible for providing basic health services and ensuring student health needs are met during the school day. One issue highlighted in the hearing was that several public charter schools had 0 hours of nursing coverage per week during FY23 despite current law requiring all schools to have a minimum of 20 hours of coverage per week. What's more, data provided by DC Health shows that 40 public charter schools do not participate in DC Health's School Health Services Program. Fourteen of these schools have their own privately hired health suite staff, 7 are currently seeking health suite approval, and 19 have no health suite staff onsite. Participation in the School Health Services Program is contingent on schools having health suite facilities onsite that meet DC Health requirements. Since many public charter schools are in non-traditional school settings or lack sufficient space, some are ineligible for DC Health nursing services. Additionally, the law does not clearly require schools not participating in DC Health's School Health Services Program to secure independent nursing coverage, nor is there an enforcement mechanism for schools who

are not securing nursing coverage. Also, there is currently no deadline for schools to request access to the School Health Services Program, which makes planning and budgeting difficult for DC Health. Finally, there is a lack of technical support provided to schools not participating in the School Health Services Program.

The shared goal for nursing coverage at schools across the District is 40 hours per week, although the law currently stipulates a minimum of 20 hours per week. However, due to a national nursing shortage, DC Health suggested the 40 hour per week goal is currently unattainable for most schools. To accommodate needs at schools, they recently transitioned to a cluster nursing model where a combination of Registered Nurses (RNs), Licensed Practical Nurses (LPNs), and other health technicians provide coverage to multiple schools at a time. DC Health shared that this model, where each cluster has at least one RN who works in consultation with a range of other health professionals to meet minimum nursing requirements, is the only plausible way of providing sufficient coverage. Put simply, while DC Health aims for 40 hours per week, the realistic average target is roughly 30 hours per week through the cluster model.

To address the aforementioned, this legislation requires:

- schools to have a minimum of 30 hours of nursing coverage during the school year and summer school;
- every public and public charter school to have nursing coverage even if said school does not participate in DC Health's School Health Services Program;
- a deadline for new schools to request nursing services from DC Health to ensure efficient budgeting and planning;
- DC Health to provide technical assistance to schools not participating in the DC Health School Health Services Program; and
- DC Health to collect and publish data on school nursing service coverage.

These proactive measures will enable DC Health and schools to allocate resources effectively, facilitate a more responsive and streamlined delivery of essential health services, and guarantee all students have adequate health services available to them.

Please contact my Legislative Director, Kendra Wiley at kwiley@dccouncil.gov if you have any questions.

Sincerely,

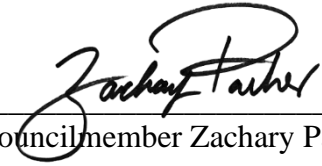
A handwritten signature in black ink that reads "Zachary Parker". The signature is written in a cursive style with a large, looping initial "Z".

Zachary Parker
Ward 5 Councilmember

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Councilmember Christina Henderson



Councilmember Zachary Parker

A BILL

IN THE COUNCIL OF THE DISTRICT OF COLUMBIA

To amend the District of Columbia Public School Nurse Assignment Act of 1987 to require every public and public charter school to provide a minimum of 30 hours a week of nursing coverage during each semester and summer school, to require every public and public charter school to have nursing coverage even if the school does not participate in the DC Health School Health Services Program, to require a deadline for new schools to request nursing services from DC Health, to provide technical assistance to all public and public charter schools not participating in the DC Health School Health Services Program, and to require DC Health to collect and publish nursing coverage data.

BE IT ENACTED BY THE COUNCIL OF THE DISTRICT OF COLUMBIA, That this act may be cited as the “Public School Health Services Amendment Act of 2024”.

Sec. 2. Section 2 of the District of Columbia Public School Nurse Assignment Act of 1987, effective December 10, 1987 (D.C. Law 7-45: D.C. Official Code § 38-621), is amended as follows:

(a) Subsection (a) is amended as follows:

“(a) Beginning August 1, 2024 a registered nurse shall be assigned to each public and public charter school for a minimum of 30 hours per week during each semester and during summer school if a summer school program is operated.”.

36 (b) Subsection (b) is amended to read as follows:

37 “(b)(1) For purposes of complying with subsection (a) of this section, a combination of
38 schools may retain at least one licensed practical nurse or other qualified health professionals, as
39 determined by DC Health, if they perform duties under the appropriate supervision of, and in
40 general collaboration with, a registered nurse.

41 (2) For purposes of this paragraph, “health professional” shall mean a person who
42 has graduated from an accredited program for physicians, licensed practical nurses, certified
43 registered nurse practitioners, physician assistants, or health technicians, and have completed any
44 required post-graduate training.

45 (3) All public and public charter schools must provide nursing services as
46 required in subsection (a) even if they do not qualify for the formal DC Health School Health
47 Services Program.”.

48 (c) A new subsection (h) is added to reads as follows:

49 “(h) Any public and public charter school that needs nursing staff for the upcoming
50 school year must submit a request with DC Health in writing by October 31st of the current
51 school year.”.

52 (d) Subsection (i) is added to read as follows:

53 “(i) DC Health shall provide technical assistance and support to all public and public
54 charter schools that are not part of DC Health’s School Health Services Program.”.

55 (e) Subsection (j) is added to read as follows:

56 “(j) DC Health shall annually collect and publish data on public and public charter school
57 nursing services.”.

58 (e) Subsection (g) is repealed.

59 Sec. 3. Fiscal impact statement.

60 The Council adopts the fiscal impact statement in the committee report as the fiscal
61 impact statement required by section 4a of the General Legislative Procedures Act of 1975,
62 approved October 16, 2006 (120 Stat. 2038; D.C. Official Code § 1-301.47a).

63 Sec. 4. Effective date.

64 This act shall take effect after approval by the Mayor (or in the event of veto by the
65 Mayor, action by the Council to override the veto), a 30-day period of congressional review as
66 provided in section 602(c)(1) of the District of Columbia Home Rule Act, approved December
67 24, 1973 (87 Stat. 813; D.C. Official Code § 1-206.02(c)(1)), and publication in the District of
68 Columbia Register.