



## RN-SCHOOL NURSE CLASSIFICATION DESCRIPTION

Job Classification Title:	<b>RN-School Nurse</b>	
Working Title(s):	Nurse, School Nurse	
FLSA Status:	Exempt	Pay Grade: C42
<i>This job classification description is intended to be generic in nature and not an exhaustive list of all duties and responsibilities. The specific tasks/duties may vary based on position assignment and as determined by the District.</i>		

### **JOB CLASSIFICATION SUMMARY**

Responsible for providing wellness and health care education to students and assisting students with health care needs.

### **DISTINGUISHING CHARACTERISTICS**

This is a professional level classification specializing in the practice of nursing, protects and promotes student health, facilitates optimal development, and advances academic success. School nurses, grounded in ethical and evidence-based practice bridge health care and education, provide care coordination, advocate for quality student-centered care, and collaborate to design systems that allow individual and communities to develop their full potential. School nurses are responsible for collecting and reviewing immunization histories; referring students for appropriate immunizations; providing preventative health programs; promoting wellness and positive health behaviors for students and parents; reporting chronic illnesses and conditions.

### **ESSENTIAL DUTIES**

*The following are intended to describe core work functions of this classification. While the level and broad nature of essential duties may not change, specific work tasks will vary over time depending on the District's needs.*

*\* In-person attendance is an essential function of this classification.*

- Collects and reviews student immunization histories upon enrollment. Refers unprotected students for appropriate immunizations;
- Provides appropriate preventative health programs;
- Provides health information to school personnel on appropriate health issues for school personnel while maintaining the Health Insurance Portability and Accountability Act (HIPAA) and legal confidentiality mandates;
- Promotes wellness and positive health behaviors for students and parents;
- Maintains inventory and proper Health Center supplies;
- Follows guidelines for exclusion from school for children exhibiting signs and symptoms of communicable disease;
- Reports chronic illnesses and conditions to Supervisor and required State Agencies and follows treatment plan;
- Reviews student development and health histories on enrollment, updates as needed and reports abnormalities and makes appropriate referrals as directed;
- Maintains individual student health records and emergency cards;



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- Assists in conducting appropriate student health screenings; documents results, reports abnormalities and makes appropriate referrals;
- Recognizes illness and injuries of students, gathers and records assessment data and administers appropriate aid following guidelines;
- Immediately reports all potential ER referrals and 911 calls;
- Documents interventions in CESD documentation system;
- Coordinates reports made to Child Protective Service and police as needed;
- Monitors at-risk students, reports signs/symptoms and refers to appropriate agencies;
- Reports industrial injuries and makes referrals;
- Reports environmental hazards to appropriate school personnel;
- Makes home visits, accompanied by school personnel, when requested;
- Administers medications as ordered by physician/nurse practitioner and upon the request of a parent;
- Participates in the child study team meetings, working collaboratively, contributing to IEP's when appropriate and monitoring progress;
- Functions as an advocate and assists students with chronic and handicapping conditions to facilitate meeting their health and educational needs in collaboration school personnel;
- Completes District, county and state reports as appropriate/required;
- Adheres to Scope of Practice laws based on the National and State Nurses Organization and Arizona Department of Health Services;
- Collaborates and supports health service providers, students, and staff within the district;
- Attend nurses meeting, in-service and trainings; and,
- Performs related work as assigned.

### **KNOWLEDGE**

- Applicable federal, state, county and city statutes, rules, policies and procedures.
- Applicable grants management.
- Maintain student health records.
- Various emergency drills (lock downs, evacuation, etc.).
- Report incidents.
- Applicable Scope of Practice as outlined in the National and State Nurses Organizations

### **SKILLS**

- Administering first-aid, medication, and specialized medical treatment.
- Implementing school health care plans.
- Responding immediately to health and safety concerns.
- Teaching staff and students in-service classes/lessons.
- Utilizing communication and interpersonal skills as applied to interaction with coworkers, supervisors, the general public and others to sufficiently exchange or convey information and to receive work direction.
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### **MINIMUM QUALIFICATIONS** (for new hires at job entry)



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### Education and Experience:

Bachelor's degree in nursing or completion of college program sufficient to fulfill the requirements for an Arizona RN License; or an equivalent combination of directly-related education and experience.

### Required Certifications/Licenses:

- Arizona Licensed Registered Nurse.
- Current Basic Life Support course completion card.
- Arizona Fingerprint Clearance Card (FPCC).

### **CLASS HISTORY INFORMATION**

Created: 11/2021

Amendments:



## RN-SCHOOL NURSE PHYSICAL & ENVIRONMENTAL FACTORS

### **OVERALL PHYSICAL STRENGTH DEMANDS:**

<b>Physical Strength for this classification is indicated below with an "X"</b>	
<input checked="" type="checkbox"/>	Sedentary: Exerting up to 10 lbs. occasionally or negligible weights frequently; sitting most of the time.
<input type="checkbox"/>	Light: Exerting up to 20 lbs. occasionally, 10 lbs. frequently, or negligible amounts constantly OR requires walking or standing to a significant degree.
<input type="checkbox"/>	Medium: Exerting 20-50 lbs. occasionally, 10-25 lbs. frequently, or up to 10 lbs. constantly.
<input type="checkbox"/>	Heavy: Exerting 50-100 lbs. occasionally, 10-25 lbs. frequently, or up to 10-20 lbs. constantly.
<input type="checkbox"/>	Very Heavy: Exerting over 100 lbs. occasionally, 50-100 lbs. frequently, or up to 20-50 lbs. constantly.

### **PHYSICAL DEMANDS:**

C Continuously 2/3 or more time	F Frequently 1/3 to 2/3 of time	O Occasionally Up to 1/3 time	R Rarely < 1 hour per week	N Never Never occurs
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Note: This is intended as a description of the way the job is currently performed. It does not address the potential for accommodation.

Physical Demand	Brief Description	C	F	O	R	N
Standing	Communicating with co-workers, observing work site, observing work duties	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sitting	Desk work	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Walking	To other departments/offices/office equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lifting	Supplies, files	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Carrying	Supplies, files	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pushing/Pulling	File draws, tables and chairs	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reaching	For supplies, for files	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Handling	Paperwork	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fine Dexterity	Computer keyboard, telephone pad, calculator, calibrating equipment	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kneeling	Filing in lower drawers, retrieving items from lower shelves/ground	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Crouching	Filing in lower drawers, retrieving items from lower shelves/ground	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Crawling	Under equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Bending	Filing in lower drawers, retrieving items from lower shelves/ground	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Twisting	From computer to telephone, getting inside vehicles	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Climbing	Stairs, step stool	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Balancing	On step stool	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Vision	Reading, computer screen, driving	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hearing	Communicating with co-workers and public and on telephone, listening to equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Talking	Communicating with co-workers and public and on telephone	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Foot Controls	Driving	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Other (Specify)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



## RN-SCHOOL NURSE PHYSICAL & ENVIRONMENTAL FACTORS

### **MACHINES, TOOLS, EQUIPMENT, SOFTWARE AND HARDWARE:**

Basic first aid tools and equipment typically found in a doctor's office or hospital setting and basic office tools and equipment.

### **ENVIRONMENTAL FACTORS:**

<b>D</b> Daily	<b>W</b> Several Times Per Week	<b>M</b> Several Times Per Month	<b>S</b> Seasonally	<b>N</b> Never
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<b>Health &amp; Safety Factors</b>	<b>D</b>	<b>W</b>	<b>M</b>	<b>S</b>	<b>N</b>	<b>Health &amp; Safety Factors</b>	<b>D</b>	<b>W</b>	<b>M</b>	<b>S</b>	<b>N</b>
Mechanical Hazards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Respiratory Hazards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Chemical Hazards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Extreme Temperatures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Electrical Hazards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Noise and Vibration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Fire Hazards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Wetness/Humidity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Explosives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Physical Hazards	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communicable Diseases	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
Physical Danger or Abuse	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
Other (Specify Below)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						

### **PROTECTIVE EQUIPMENT REQUIRED:**

None.

### **NON-PHYSICAL DEMANDS:**

<b>C</b> Continuously 2/3 or more time	<b>F</b> Frequently 1/3 to 2/3 of time	<b>O</b> Occasionally Up to 1/3 time	<b>R</b> Rarely < 1 hour per week	<b>N</b> Never Never occurs
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<b>Description of Non-Physical Demands</b>	<b>C</b>	<b>F</b>	<b>O</b>	<b>R</b>	<b>N</b>
Time Pressure	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emergency Situation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Frequent Change of Tasks	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Irregular Work Schedule/Overtime	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Performing Multiple Tasks Simultaneously	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Working Closely with Others as Part of a Team	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tedious or Exacting Work	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Noisy/Distracting Environment	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (Specify Below)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



## RN-SCHOOL NURSE PHYSICAL & ENVIRONMENTAL FACTORS

### **PRIMARY WORK LOCATION**

<input checked="" type="checkbox"/>	Office Environment
<input type="checkbox"/>	Warehouse
<input type="checkbox"/>	Shop
<input type="checkbox"/>	Recreation/Neighborhood Center
<input type="checkbox"/>	Vehicle
<input type="checkbox"/>	Outdoors
<input type="checkbox"/>	Other (Specify Below)



## RN-SCHOOL NURSE ACKNOWLEDGEMENT

### SIGNATURE – REVIEW AND COMMENTS:

I have reviewed this description and find it to be an accurate representation of the demands of the classification.

\_\_\_\_\_  
Signature of Employee

\_\_\_\_\_  
Date

\_\_\_\_\_  
Job Title of Supervisor

\_\_\_\_\_  
Signature of Supervisor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Job Title of Department Head

\_\_\_\_\_  
Signature of Department Head

\_\_\_\_\_  
Date

Comments: \_\_\_\_\_

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The above statements are intended to describe the general nature and level of work being performed by individuals assigned to this classification. They are not intended to be an exhaustive list of all responsibilities, duties, and skills required. This description is subject to modification as the needs and requirements of the classification change.