

Nursing services in Utah public schools 2023–2024 Annual report

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Executive summary

This report offers a comprehensive overview of student health data collected across Utah public schools and provides valuable insights into school health services and the vital role of school nurses. The data comes from the Utah School Health Workload Survey.

Key findings:

- 1. **School nurse-to-student ratios:** The data reveals varying nurse-to-student ratios statewide. While some schools have adequate staffing, others face significant shortages. Improving these ratios is crucial to make sure every student has access to essential health services.
- 2. **Chronic absenteeism:** Chronic absenteeism remains a significant issue, impacting student health and academic success. The report underscores the need for targeted interventions to address absenteeism, highlighting the role of school health services in supporting better attendance.
- 3. **Health metrics:** The report provides detailed information on health metrics such as medication usage, health screenings, and emergency responses. This data identifies both successful practices and areas needing improvement.
- 4. **Successes and opportunities:** Celebrating achievements in school health services, the report also identifies areas for improvement. Emphasis is placed on leveraging successful practices and addressing gaps to enhance overall student well-being.
- 5. **Impact on national data:** State-level data contributes to a broader understanding of student health needs. This comparison helps highlight both state-specific challenges and successes within the national context.

Action message: To improve overall student health outcomes, it is important to consider increasing funding and resources to support school nurse staffing. Stakeholders are encouraged to use this report to inform policy decisions and



resource allocation, making sure all students receive the care and support they need.

The role of school nurses is central to these efforts, as they play a critical part in enhancing student health and academic performance. This report aims to guide stakeholders in recognizing achievements and tackling areas for improvement to better support student success.

Changes in school health services from 2024 legislation

HB 468 Student Health Amendments (effective July 1, 2024) – Employees of local education agencies (LEAs) can administer adrenal crisis rescue medication to students experiencing adrenal insufficiency under certain circumstances.

Trained school staff who volunteer for this responsibility are protected under the law and must complete specific training and demonstrate skills learned with the school nurse or other trained healthcare professional.

HB 475 School Prescription Amendments (effective August 1, 2024) – Amends Utah Code <u>26B-4-409</u> and <u>26B-4-410</u> waiving liability for certain persons under the law.

- Allows approved health care providers to provide a prescription upon request to qualified school employees or a school nurse for an epinephrine auto-injector and stock albuterol.
- Requires the Utah Department of Health and Human Services to issue standing prescription drug orders for stock epinephrine and stock albuterol.

HB 499 Education Reporting Requirements (effective May 1, 2024) – This bill amends <u>53-9-213</u> which pertains to Seizure Awareness Training and other required



LEA trainings. The amendment reduces the frequency of training requirements from every year to every three years.

Utah school nursing services

Definition of school nurse

During the 2022 general legislative session, a definition for school nurses was established:

"School nurse means a registered nurse ... whose primary role is the care of a defined group of students" (<u>UCA 53E-1-102</u>).

According to Utah law, the following licensed professionals may provide school nursing services:

- **Registered Nurses (RN):** Utah law permits school districts to hire RNs to deliver school nursing services.
- **Licensed Practical Nurses (LPN):** Under Utah law, LPNs must practice under the supervision of a registered nurse or licensed physician (<u>UCA 58-31b-102</u>).

National Association of School Nursing Definition of school nursing

The National Association of School Nurses defines school nursing as:

"School nursing: a specialized practice of public health nursing, protects and promotes student health, facilitates normal development, and advances academic success. School nurses, grounded in ethical and evidence-based practice, are the leaders that bridge health care and education, provide care coordination, advocate for quality student-centered care, and collaborate to design systems that allow individuals and communities to develop their full potentials" (NASN, 2017).



National School Nursing Practice Framework

The National Association of School Nurses updated and re-released the School Nursing Practice Framework™ in 2024. This revised version introduces a new design with action-oriented components aimed at enhancing the daily practice of school nurses. It includes tools and resources to support effective communication with administrators, policymakers, and other education professionals.

The updated framework is visualized as layers of support:

- **Foundation:** The standards of practice form the base for effective school nursing.
- Middle layers: The school nurse is depicted as encompassing four overlapping practice principles: care coordination, quality improvement, community/public health, and leadership. This imagery emphasizes the school nurse's pivotal role in these areas.
- Top layer: The student, family, and school community are highlighted as the
 central focus, underscoring a student-centered approach to school health.
 This design aligns with the Whole School, Whole Community, Whole Child
 model, showcasing how school nurses support and enhance students' health
 and educational outcomes while engaging with families and stakeholders.







Standards of Practice

- Ensure practice consistent with the scope and standards of school nursing practice, health and education laws (consider the individuals with Disabilities Education Act, Section 504 of the Rehabilitation Act of 1973, Nurse Practice Act, state laws regarding school nursing practice and delegation), federal/state/local policies and regulations, and NASN positions statements and code of ethics.
- Employ clinical judgment and critical thinking outlined in nursing process and prioritization.
- Integrate evidence and best/promising practices (consider multi-tiered systems of support, clinical practice guidelines).
- Safeguard privacy of students and data (consider Health Insurance Portability & Accountability Act, Family Educational Rights and Privacy Act).



Care Coordination

- Provide direct care for emergent, episodic, and chronic mental and physical health needs.
- Connect students and families to available resources.
- Collaborate with families, school community, mental health team (including school counselors, social workers, and psychologists), and medical home.
- Develop and implement plans of care.
- Foster developmentally appropriate independence and self-advocacy.
- Provide evidence-based health counseling.
- Facilitate continuity of care with family during transitions.





Leadership

- Direct health services in school, district, or state.
- Interpret school health information and educate students, families, school staff, and policymakers.
- Advocate for district or state policies, procedures, programs, and services that promote health, reduce risk, improve equitable access, and support culturally appropriate care.
- Engage in and influence decision-making within education and health systems.
- Participate in development and coordinate implementation of school emergency or disaster plans.
- Champion health and academic equity.
- Share expertise through mentorship/ preceptorship.
- Practice and model self-care.



Quality Improvement

- Participate in data collection for local, state, and national standardized data sets and initiatives.
- Transform practice and make decisions using data, technology, and standardized documentation.
- Use data to identify individual and population level student needs, monitor student health and academic outcomes, and communicate outcomes.
- Engage in ongoing evaluation, performance appraisal, goal setting, and learning to professionalize practice.
- Identify questions in practice that may be resolved through research and evidence





Community/Public Health

- Provide culturally sensitive, inclusive, holistic care.
- Conduct health screenings, surveillance, outreach, and immunization compliance activities.
- Collaborate with community partners to develop and implement plans that address the needs of school communities and diverse student populations.
- Teach health promotion, health literacy, and disease prevention.
- Provide health expertise in key roles in school, work, and community committees/councils/coalitions.
- Assess school and community for social and environmental determinants of health.



School nurse professional qualifications and responsibilities

In Utah, school nurses play a crucial role in protecting the health and well-being of students. School nurses must fulfill specific educational qualifications and carry out a wide range of responsibilities to meet the demands of this essential position. While educational levels among school nurses in Utah vary, a bachelor's degree is recommended for this role. However, the minimum requirement is a Registered Nurse (RN) license. The following outlines the qualifications and responsibilities that school nurses are required to meet and perform in this position.

Required qualifications

- RN licensed by the state board of nursing.
- Accountable to practice within current state laws, rules, and regulations.
- Expertise in several areas, including pediatric, public health, and mental health nursing, education, and child health laws.
- Ability to work independently.
- Basic Life Support (BLS)/CPR certification.

Recommended qualifications

- Bachelor's degree in nursing (BSN).
- School nurse certification through the National Board of Certification of School Nurses.

Primary responsibilities School nurses strive to advance the well-being of students and staff within the school environment. School nurses promote student health and safety by providing the following services:

- Comply with national and state laws.
- Assess illness and injury.
- Identify, assess, plan, intervene, and evaluate student health concerns.



- Provide activities and education about health as needed.
- Manage chronic diseases.
- Participate in developing and implementing Individualized Education Plans (IEPs) and Section 504 Plans for students whose health needs interfere with learning.
- Implement Individualized Healthcare Plans (IHPs) and Emergency Action Plans (EAPs).
- Obtain medication and procedure orders from parents/guardians.
- Provide pediatric nursing procedures, such as ventilator care, gastrostomy feedings, tracheostomy care, and catheterization.
- Delegate, supervise, and evaluate lay staff.
- Administer medication.
- Monitor student immunization records.
- Complete vision screenings and provide other screenings as needed.
- Assess and provide intervention for student mental health needs.
- Participate on crisis teams.

The following table details the education levels among Utah school nurses:

	School nurse education levels in 2023-24 school year					
	Training program	Associate's degree	Bachelor's degree	Master's degree	Doctorate degree	National certification
Nursing	12	87	231	36	1	19
Education	0	0	0	3	0	0
Public health	0	0	0	2	0	0
Other	3	1	9	2	0	0
Total	15	88	240	43	1	19



Utah school health workload report

In November 2023, the Utah State Board of Education (USBE) passed Board Rule R277-415, School Health Reporting. This rule requires schools and districts to compile key health data annually in the School Health Workload Report. This year, with the addition of 73 more charter schools, the report offers a more comprehensive view of school health across the state.

However, we have not yet achieved full data coverage. Some local education agencies (LEAs) are still in the process of submitting their reports. We are actively working with these LEAs to collect the remaining data. Consequently, the data from these missing submissions will not be reflected in this year's report but will be included in future updates.

The collected data this year includes information on the number of students with chronic health conditions, the types and quantities of medications administered, screenings conducted by school nurses, and staff training sessions provided.

The following tables summarize the participation rates of the LEAs as well as students for the 2023-2024 school year.

School Health Workload Report participation rates					
	Number of LEAs that participated	Total (LEAs)	Participation rate		
Districts	42*	43*	97%		
Charter schools	101	123	82%		

^{*}District count includes Utah Schools for the Deaf and the Blind.



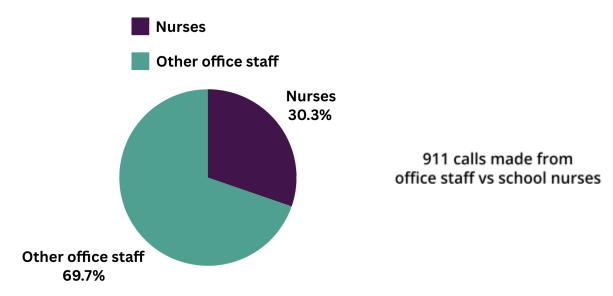
Number of students represented in the School Health Workload Report					
	Number of students represented	Total students enrolled	Representation rate		
District	593,428	593,950	99.9%		
Charter	71,020	79,823	88%		
Total	664,448	673,773	98%		

^{*}This table only shows data for public schools.

Dispositions

The School Health Workload Report consistently shows that school nurses have a higher success rate in returning students to class after a health room visit compared to other office staff. Rather than sending them home or calling 911, school nurses are able to effectively address the student's health needs and allow them to continue with their education. This is a significant finding and highlights the importance of having trained school nurses on staff.

The chart below shows the percentage of RNs and other school staff who chose to call 911 during the 2023-2024 school year.





Chronic health conditions

School nurses submitted data about the following chronic health conditions for the 2023-2024 school year.

The nu	The number of students with diagnoses and IHPs or EAPs for chronic health conditions in the 2023-2024 school year						
Chronic condition	Asthma	Severe allergies*	Type I diabetes	Type II diabetes	Seizures	Mental health**	
Diagnosis by healthcare provider	17,683	9,980	2,688	86	3,430	23,798	
Students with IHP or EAP	6,470	5,273	2,452	67	2,466	4,641	
Students with 504 Plan	1,047	983	1,494	38	446	4,596	

^{*}Severe allergies causing anaphylaxis.

Chronic absenteeism

During the 2023-2024 school year, 114,247 students in Utah were classified as chronically absent, representing 17% of the student population. A student is considered chronically absent if they miss 10% or more of the school year, which

^{**}Mental health conditions include ADD/ADHD, depression, anxiety disorders, oppositional-defiant disorder, mood disorders, schizophrenia, autism spectrum disorder, bipolar disorder, borderline personality disorder, dissociative identity disorder, obsessive-compulsive disorder, post-traumatic stress disorder, separation anxiety disorder, social phobia, Tourette's disorder, eating disorders, and others.



equates to more than 18 days, regardless of whether the absences are excused or unexcused.

Only 14% of students who were chronically absent had chronic illnesses, indicating that while chronic health conditions contribute to absenteeism, other factors also play a significant role.

The num	The number and percent of students who are chronically absent by diagnosis						
	Asthma	Anaphylaxis	Type l diabetes	Type II diabetes	Seizures	Mental health	
Chronically absent students by diagnosis	2,910	1,164	536	26	645	5,355	
Percentage of students with diagnosis who are chronically absent	16%	12%	20%	30%	19%	22%	

Medications

Many students require medication during the school day. In the 2023-2024 school year, the following data was collected on medication administration:

- **3,391** daily scheduled medication orders.
- **8,361** as-needed medication orders.
- **46** emergency epinephrine injections administered to students.
- **7** emergency epinephrine injections administered to staff or visitors.
- **14** glucagon injections.
- 10,337 asthma rescue medication administrations for students.



- **85** stock albuterol administrations for students.
- **431** physician orders for emergency seizure rescue medication.
- 92 emergency seizure rescue medication administrations.
- **2,011** school volunteers trained to administer emergency seizure rescue medication.
- **53** school districts with naloxone policies and supplies.

Health screenings

School nurses conduct various health screenings, including vision, hearing, and oral health. Vision screenings are mandated by law (<u>UCA 53G-9-404</u>), while other screenings are determined by district or school policy.

The following data on health screenings and their outcomes were collected during the 2023-2024 school year:

- **331,417** distance vision screenings.
- 27,841 referrals following distance vision screenings.
 - **6,930** students received treatment for vision issues.
 - **4,859** students received financial assistance for vision exams or glasses.
- 19,064 hearing screenings.
 - 519 students referred to a hearing professional
 - **34** total number of students referred who received treatment.
- **6,141** oral health screenings.
 - o **6,987** oral health varnish applications.
 - **564** restorative dental services provided through school-sponsored programs.



School nurse trainings

School nurses provide essential education and training to both students and school staff. Student education addresses a wide range of various topics, including but not limited to maturation, hygiene, hand washing, asthma, and oral health. While we do not collect data on all areas taught in schools, below is a table of the subjects that are reported in the School Health Workload Report.

In the 2023-2024 school year, school nurses educated students on the following topics:

Number of students receiving school nurse education by topic					
Topic	Maturation	Asthma	Hygiene	Handwashing	Oral health
Number of students	26,295	3,082	38,042	43,259	27,733

School nurses routinely train other school staff to manage the needs of students with chronic health conditions. These trainings are done every year or more frequently, as needed, based on individual student health requirements.

In the 2023-2024 school year, school nurses provided the following trainings to school staff:

Number of school staff trained in management of chronic health conditions					
Topic	Asthma	Anaphylaxis	Diabetes	Seizures	
Number of staff	21,156	26,965	17,941	23,372	



School nurse staffing recommendations

Aligning school nurse assignments with the specific needs of each school and community leads to better health, safety, and learning outcomes. When determining staffing levels, it is essential to consider factors such as student enrollment, health acuity levels, and community health disparities. Additionally, social determinants of health—such as poverty, education level, access to healthcare, and housing stability—should be considered, as these factors significantly impact student health outcomes.

Staffing needs should be evaluated and determined at least once a year, using student and community-specific health data (NASN, 2020). The following must be considered when determining safe school nurse staffing levels in schools:

- Student enrollment numbers; and
- Social determinants of students and the community which include but are not limited to poverty, language barriers, education level, access to healthcare, safe housing, and transportation needs; and
- Health disparities of students/community which include but are not limited to premature birth, race and ethnicity, disability, sexual orientation, and immigration status; and
- Health acuity (see chart below) of students and the community.

Based on these factors, the Utah Department of Health and Human Services (DHHS) recommends the following staffing models:

- One full-time RN per school.
- For schools with high health acuity, social determinants of health, or significant health disparities: several full-time RNs per school.
- For schools with low health acuity, social determinants of health, or minimal health disparities: 1 full-time RN for no more than 3 schools.



For LEAs (local education agencies) with fewer than 2,000 students, DHHS recommends the following school nurse staffing levels:

	Recommended school nurse staffing levels for LEAs with fewer than 2,000 students					
LEA size (students)	One school nurse per 2,000 students	One school nurse per 750 students	Description			
<500	0.1 – 0.25 FTE	0.1 – 0.7 FTE	Depending on health acuity/social determinants of health/disparities			
500-1000	0.25 – 0.5 FTE	0.7 – 1.3 FTE	Depending on health acuity/social determinants of health/disparities			
1000-1500	0.5 – 0.75 FTE	1.3 – 2.0 FTE	Depending on health acuity/social determinants of health/disparities			
1500-2000	0.75 – 1.0 FTE	2.0 – 2.7 FTE	Depending on health acuity/social determinants of health/disparities			

Utah Department of Health and Human Services. (2022).

School nurse to student ratios

Utah legislators acknowledge that students in the public schools are better protected against risks to health and safety when schools have school nurses readily available (UCA 53G-9-204). School nurse staffing should be assessed every year and determined by the unique needs of the school community. Some LEAs may have one RN for each school, while others may have one RN covering multiple schools or use health clerks or LPNs under the RN's supervision. The National Association of School Nurses believes that all students need access to a school nurse every day (School Nurse Workload, 2020). This recommendation is based on the expertise and training of RNs in providing quality healthcare to students.



School nurse to student ratios in the 2023-2024 school year				
Number of Utah students enrolled in school districts*	Number of Utah school nurse (RN) FTEs in school districts	Ratio of school nurse to students		
593,950	284	1:2,091		

 $[\]star$ All K-12 students enrolled in school districts, including those with disabilities.

2023-2024 school nurse (RN) to student ratios by district					
District	Student enrollment (as of October 2023)	Total school nurse (RN) full time employees	Nurse to student ratio		
Alpine	84,710	31.8	1:2664		
Beaver	1,468	0.6	1:2,447		
Box Elder	12,268	6	1:2,045		
Cache	19,794	6	1:3,299		
Canyons	32,733	22.5	1:1,455		
Carbon	3,178	1.7	1:1,869		
Daggett	177	.5	1:354		
Davis	70,703	24	1:2,946		
Duchesne	5,143	0.8	1:6,429		
Emery	2,058	0.4	1:5,145		
Garfield	1,511	0.8	1:1,889		
Grand	1,397	2	1:699		
Granite	58,312	21	1:2,777		
Iron	14,479	7	1:2,068		
Jordan	57,436	25.5	1:2,252		
Juab	2,686	2.8	1:959		
Kane	1,426	0.5	1:2,852		
Logan	5,130	1	1:5,130		



20	2023-2024 school nurse (RN) to student ratios by district				
District	Student enrollment (as of October 2023)	Total school nurse (RN) full time employees	Nurse to student ratio		
Millard	3,109	0.9	1:3,454		
Morgan	3,181	1.5	1:2,121		
Murray	5,601	2.7	1:2,074		
Nebo	43,672	12	1:3,639		
North Sanpete	2,534	2.8	1:905		
North Summit	1,043	1	1:1,043		
Ogden	10,151	5	1:2,030		
Park City	4,246	6.4	1:663		
Piute	262	0.2	1:1,310		
Provo	13,455	7	1:1,922		
Rich	522	Unknown	Unknown		
Salt Lake City	18,966	7	1:2,709		
San Juan	2,831	3	1:944		
Sevier	4,502	1.3	1:3,463		
South Sanpete	3,171	2.3	1:1,379		
South Summit	1,632	3	1:544		
Tintic	262	1	1:262		
Tooele	15,588	6	1:2,598		
Uintah	6,749	3	1:2,250		
Wasatch	8,667	3	1:2,889		
Washington	36,753	14.2	1:2,588		
Wayne	402	0.2	1:2,010		
Weber	32,103	14.8	1:2,169		



Students with chronic health conditions

The Utah Nurse Practice Act allows school nurses to train and delegate nursing responsibilities to non-health professionals to meet the needs of medically complex students (<u>UCA 58-31b-102(12)</u>). In Utah, it is common for one nurse to train and oversee many unlicensed assistive personnel who perform medical tasks.

Data on the number of students with chronic health conditions (categorized as medically complex, medically fragile, or nursing dependent) were collected during the 2023-2024 school year. Students are classified into 5 levels:

Level 1: Minimal or occasional healthcare concerns

The student's physical or social-emotional condition is stable, with infrequent visits to the school nurse (typically once a year or as needed).

Level 2: Health concerns

The student's physical or social-emotional condition is uncomplicated and predictable, requiring occasional monitoring by the school nurse (ranging from once every two weeks to once a year). An IHP (Individual Health Plan) or EAP (Emergency Action Plan) may be necessary. *Examples:*

- ADHD
- Mild asthma
- Mild allergies
- Medication administration

Level 3: Medically complex

The student's condition is complex or unstable, necessitating daily treatments and close monitoring by the school nurse. An IHP or EAP is recommended. *Examples:*

Anaphylaxis



- Cancer
- Diabetes without complications
- Moderate to severe asthma
- Mild to moderate seizure disorder
- Spina bifida with self-catheterization
- Less than 15 minutes of delegated daily care (catheterizing, supervising diabetes care, tube feeding)

Level 4: Medically fragile

The student faces a daily risk of life-threatening emergencies and must have an IHP. *Examples:*

- Unstable or newly diagnosed diabetes needing supervision
- Spina bifida requiring assistance with catheterization
- Frequent, severe seizure disorder requiring emergency seizure rescue medication
- More than 15 minutes of delegated daily care (catheterizing, supervising diabetes, tube feeding)

Level 5: Nursing dependent

The student requires 24-hour, one-to-one skilled nursing care for survival, possibly including dependence on breathing devices. An IHP is required. *Examples:*

Tracheostomy requiring suctioning

Students classified as each health concern level during the 2023-2024 school				
year				
	Level 2	Level 3	Level 4	Level 5
Number of students	66,001	14,073	3,606	190



School nurse funding

Utah charter schools and school districts receive state-appropriated funding through the Minimum School Program (MSP). The Basic School Program is one area of the MSP that distributes state funding through statutory formulas that are used to guarantee base funding for all students in Utah. The Basic School Program distributes funds based on student counts in each school, also known as the weighted pupil unit (WPU). The funding amount per student pays for staffing and other basic needs for schools to operate, including the hiring of school nurses. Other current sources of school nurse funding include specific grants to supplement the cost of paying for school nursing services.

Summary

This report underscores the vital role school nurses play in supporting student health, safety, and academic success. Chronic absenteeism remains a critical issue, with 17% of students in Utah classified as chronically absent. Although chronic health conditions contribute, they account for only a fraction of absenteeism, highlighting the need for a broader approach to address this issue.

This report emphasizes ongoing efforts to enhance school health services, with new legislation impacting medication administration and prescription processes. Continued focus on improving school nurse-to-student ratios and integrating school nurses into attendance teams is essential for addressing absenteeism effectively.

Aligning resources and support with the NASN School Nursing Practice Framework will be crucial to advance student health and reduce absenteeism. Investing in school health infrastructure and using data-driven strategies will further enhance our ability to support students' academic and personal growth.



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