Minnesota School Nursing History Timeline

“Few will have the greatness to bend history itself; but each of us can work to change a small portion of events, and in the total; of all those acts will be written the history of this generation.” - Robert F. Kennedy

The rich history of our work in school nursing in Minnesota certainly helps us understand our professional role and advocacy for children’s health in school settings. History is framed by the current events of our government and society. Our first school nurse leaders were intensely involved in developing resources for school nurses and schools to actively promote healthy children. The following highlights of Minnesota school nursing were found in numerous sources and are referenced. The selection of events in this timeline is by no means inclusive of all notable events in Minnesota school nursing, but was an attempt to define some essential highlights in our history.

The Minnesota’s 100 Years of School Nursing Celebration Committee

© 2009 School Nurse Organization of Minnesota
1900's-1920's

**Historical Focus:** Medical inspections to exclude ill children from school. The focus evolves from control of contagion to identification of physical defects, limiting disability through correction of defects, health education for parents and students. (Wold & Dagg, 1981)

**School Nurse Role:** School nurses provide home visits to teach parents how to treat children so they could return to school. School nurses independently inspect children or assist physician, provide home visit follow-up and health education. They develop and implement a health education program which is included in the curriculum. They work with teachers, promoting children's health and health education. (Wold & Dagg, 1981)

1. **1902** New York City: Lillian Wald initiates public school nursing and hires Lina Rogers as first school nurse (Wold & Dagg, 1981)

2. Lina Rogers wrote out course of treatment for most frequently recurring diseases and health conditions of school children: Written health regulations for pediculosis, ringworm of scalp, scabies, impetigo, molluscum contagium, conjunctivitis. (Zaiger, 2006)

3. **1909** Saint Paul Public Schools Board of Education hires Virginia Rice as Minnesota's first school nurse. Early focus: communicable diseases/exclusion; identify physical defects/corrections; health education/prevention. (Saint Paul Public Schools archived records)

4. **1909** In the first “Report of the School Physician and School Nurse” October-November 1909... “the aim of the examination of school children thus far conducted has been to discover and report those physical ailments and defects which threaten the individual health of children and affect their progress in the schools...It is believed...the study...will convince anyone that medical inspection represents not expense but economy.” “More good can be accomplished by prevention than treatment...the purpose of school health work was to promote health among school children in order that they might profit from their classroom work.” (Meyerding, 1909)

5. **1909** The School of Nursing at the University of Minnesota becomes the first U.S. nursing school organized as an integral part of the University. (Schrefer, 2000)

6. **1918** The Spanish influenza pandemic was thought to be transferred to Minnesota by an army private on furlough from Camp Dix, N.J. on 9-25-1918. By October 11, there were 750 cases and the City Health Commissioner closed schools and other public places. The school nurses in St. Paul schools devoted all their time trying to prevent the spread of the disease and in helping care for those who were ill...they visited homes...giving bedside care where needed.” (A Historical Perspective, 1918)

7. **1922** Insulin was discovered and revolutionizes medical care for diabetics. (Schrefer, 2000)
8. **1924** An experiment began in the Minneapolis Schools to test the hearing of fourth grade students using an audiometer. Vision testing began the same year. (Historical Summary, 1980)

9. **1924-25** Minnesota had a serious smallpox epidemic. Mass smallpox vaccination clinics were held in Minneapolis Public Schools. “Saint Paul started vaccinating on a big scale...we vaccinated in the schools.” (Lindblad, 1914-1952; Historical Summary, 1980)

10. **1926** Rebecca Aberle, Saint Paul school nurse, started the hearing testing program with an audiometer loaned by the Graybar Electric Company...with 40 earphones making it possible to test groups of 40 children at a time. (Jordan, 1953)

### 1930’s-1940’s

**Historical Focus:** WWII nurse recruiting reduces numbers of school nurses serving schools. School nursing began to develop services in rural schools. (Wold & Dagg, 1981)

**School Nurse Role:** School Nurses provide consultation to administrators about health programs, in-service to teachers on health screening, interpretation of health exams data to parents, referrals to community resources, and home visits for parent education. (Wold & Dagg, 1981)

1. **1930** An educational program shows the value of early detection of TB using the Mantoux test. (Jordan, 1953)

2. **1935** Gerbard Dormagk discovers sulfonamides (Schrefer, 2000)

3. **1940-50** Teachers and aides are expected to take care of ill and injured children while nurses focused on health education. (Wold & Dagg, 1981)

4. **1940’s** Special classes begin for handicapped, visually and hearing impaired. (Wold & Dagg, 1981)

5. **1943** Streptomycin is discovered; the first antibiotic to be effective in treatment of Tuberculosis (Schrefer, 2000)

6. **1945** Responsibility for school health program shifted from school nurse and physician to shared responsibility with teachers, student, and health personnel. A coordinated, integrated health education curriculum is proposed. (Wold & Dagg, 1981)

7. **1946** Penicillin is developed and mass produced to treat up to 7 million individuals per year. (Schrefer, 2000)

8. **1946** The expanded educational role for school nurses encouraged additional educational preparation and eventually certification requirements developed in several states. (Wold & Dagg, 1981)

9. **1947** School based clinics in Chisholm, Minnesota, noted for national recognition in an edition of Minnesota Health. (Minnesota Department of Health [MDH], 1997)
10. **1948** The first edition of the *School Health Manual for use in Minnesota Schools* was prepared by a Joint Committee of Minnesota Departments of Health and Education and states “The school nurse is responsible to the school physician if there is one on a full time basis. Otherwise, she functions under the school administrator.” (Minnesota Departments of Health and Education, 1948)

### 1950’s – 1960’s

**Historical Focus:** Health is generally accepted as first objective of education, with “optimum health for every school child.” More school nurses are hired by Boards of Education and less by Departments of Health. Other professionals are added to the school team increasing school nurse role confusion in the 60s. (Wold, 2001)

**School Nurse Role:** Nurses as the health educator emphasize nutrition and mental health. Immunizations are given in schools to prevent disease. Tuberculin testing is required for school staff. (Wold, 2001; L. Hoge & M.L. Christianson, personal communication, June 3, 2009)

1. **1950’s** Chemical dependency emerges as a critical national health problem. (Wold & Dagg, 1981)

2. **1950** Polio becomes major public health problem affecting over 50,000 Americans. (Schrefer, 2000)

3. **1950’s** Health education programs in schools increase with nurses as “health educators”. (Wold & Dagg, 1981)

4. **1950’s** Use of Cumulative Health Record is initiated. (Wold & Dagg, 1981)

5. **1950’s** School nurses administer measles and polio vaccine in Minnesota schools. (Z. Hoge & M.L. Christianson, personal communication, June 3, 2009)

6. **1950’s** Delphie Fredlund advocated for preparation at the graduate level for school nurses. (Wold & Dagg, 1981)

7. **1951** School Health Councils are initiated with shared responsibilities between teacher, administrator and nurse. (Wold & Dagg, 1981)

8. **1955** Polio killed virus vaccine is released for use in US. Polio Sabin live virus vaccine developed and used in US in 1960. By 1961, the incidence of polio drops by 95%. (Schrefer, 2000)

9. **1959-60** Three credit “The Nurse in the School” class is offered as part of Public Health Baccalaureate Nursing Program at University of Minnesota, taught by Barbara Stocking. (School of Public Health, 1958)

11. **1961** Tuberculosis testing is required for all school hires prior to employment. MS 123.69-outdated. (SNOM archived records, 1961-2003)

12. **1966** The following recommendation for nurse-pupil ratio has been made by the Joint Committee on Health Problems in Education of the National Education Association and the American Medical Association: one nurse per 1200-1800 elementary school children and one nurse per 1800-2400 secondary school children. (State of Minnesota, 1966)

13. **1968** The School Nurse Organization of Minnesota (SNOM) is formed as a branch of the Student Personnel Section of Minnesota Education (MEA) and had 71 members. (SNOM archived records, 1961-2003)

14. **1968** SNOM sent 2 delegates (Ernestine Sime and Aiko Higuchi) to the National Education Association (NEA) convention in Dallas, TX on July 5 when the Department of School Nurses was formed as affiliate of NEA. This was the forerunner of the National Association of School Nurses (NASN). (SNOM archived records, 1961-2003)

15. **1968** First Annual SNOM Convention is held at the Radisson Hotel in Minneapolis on October 25, 1988 during the MEA Convention. SNOM is now a sub group in MEA and became an affiliate of the Department of School Nurses within the NEA in 1969. (SNOM archived records, 1961-2003)

16. **1969** Early Periodic Screening, Diagnosis and Treatment (EPSDT) is initiated. (Title XIX of Social Security Act) is later amended in 1989. (MDH, 1997)

**1970’s – 1980’s**

**Historical Focus:** School health services rapidly expanded to include prevention, health promotion and meeting special health needs. Most remarkable milestone was the development of national practice standards for school nursing. (Wold, 2001)

**School Nurse Role:** Nurses provided increased services to students with disabilities, including mental health care, drug prevention and referral with an emphasis on health needs of students with disabilities. School nurse practitioner programs developed. (Wold, 2001)

1. **1970** Saint Paul School Nurse, Zorada Hoge helped author Standards for School Nurse Services, a National commission on Standards, Department of School Nurses of the National Education Association (later the National Association of School Nurses.) (Zaiger, 2006)

2. **1970** SNOM became an independent organization affiliated with MEA. (SNOM archived records)

3. **1970** Minneapolis and Saint Paul Schools developed school based clinics providing primary, prenatal and dental care for students. (MDH, 1997)
4. **1971** First Annual SNOM Spring Conference was held on April 24, 25 at Ramada Inn, St. Paul. (SNOM archived records, 1961-2003)


8. **1973** “St. Cloud Public Schools Narrative Health Report” by Marjorie A. Moore, PHN, in May 1973 states “School nursing services in this district are part of family and community public health nursing. A composite picture of the health program is needed so that school health services are not isolated.” (MDH, 1973)

9. **1973-75** School Nurse Practitioner Program was initiated by the University of Minnesota. Delphie Fredlund was instructor. (SNOM archived records, 1961-2003)

10. **1974** Minnesota Goals of School Nursing is published and updated in 1983. (Bergman et al., 1983)


12. **1975** Education of All Handicapped Children Act mandated a free and appropriate education for children with disabilities in the least restricted environment. P.L. 94.142 (MDH, 1997)

13. **1976 and 1987** Community Health Services provided for community-based planning in Minnesota that invited school nurses to assist with input into mandated community needs assessment. M.S. 145A. (MDH, 1997)

14. **1977** Immunizations of DPT, MMR, and Polio were first required for school entrance. MS 123.70. (MDH, 1997)


16. **1977** MN legislature requires permanent public health cumulative records initiated for each child of school age and also requires those records to be transferred with the child to any school. MS 144.29. (MDH, 1997)

17. **1978** MN legislature mandates schools to provide health services to non-public school students. M.S. 123.931. (MDH 1997)


22. **1985** SNOM, Minnesota Department of Education, Minnesota Education Association developed *Presenting Aids: A Resource Guide for Inservice Education on Acquired Immune Deficiency Syndrome and Educational Implications and two video tapes, Aids/Afraid Part 1 and Part 2*. These products provided national leadership and guidance to the educational community. (Schuster, Will, & Luehr, 1985)


24. **1988** MN legislature requires school nurses. “By July 1, 1988, a board of a school district with 1,000 pupils or more must employ at least one full-time licensed school nurse.” MS 123.35. (MDH, 1997)

26. **1988** The Medicare Catastrophic Health Care Act authorized the use of Federal Medicaid funds for health related services provided to children as outlined in their IEP or IFSP. P.L. 100.360. (MDH, 1997)

27. **1988** Schools are required to provide AIDS/HIV prevention programs, M.S. 121.203. (MDH, 1997)

28. **1989** Saint Paul Public Schools develops a provider agreement with MN Department of Human Services to provide dental health services. (J. Lowe, personal communication, June 25, 2009)

29. **1989** Minnesota Student Survey was initiated and implemented by MN Department of Education. (Reflections of Social Change, 1992)

### 1990's

**Historical Focus:** Keeping students in school is the priority. PL 94-142 is reauthorized requiring students with disabilities to be included in least restrictive environment. Immunization laws are strengthened and schools are now required to exclude non-compliant students. Electronic record keeping is implemented. (Wold, 2001)

**School Nurse Role:** School nurses provide the health portion of the IEP and perform increasing numbers of, technical nursing procedures. They also provide illness and injury care, immunization compliance, mental health promotion and intervention for depression, suicide and violence, chemical and tobacco
use, pregnancy and parenting interventions, crisis team participation, general health screening, and specialized screening for asthma, attention deficit, and recurring tuberculosis. (Wold, 2001)

1. **1990** Reauthorization of P.L. 101.476 Individuals with Disabilities Education Act requires districts to assist students with disabilities to obtain a public school education. (MDH, 1997)

2. **1990** Section 504 of the Federal Rehabilitation Act of 1973 and the Federal American Disability Act of 1990 requires school districts to provide reasonable accommodations or modifications for students with a disability. M.S. 120.185. (MDH, 1997)

3. **1992** Memorandum from Wayne Erickson, Manager, Special Education Section of MDE, provides confirmation that nursing services for Special Education students are reimbursable to school districts by state special education funds. (MDH, 1997)


6. **1993** Saint Paul Public Schools secured a provider agreement to become a Public Health Nursing Clinic Provider, hiring a Nurse Practitioner which allowed billing for immunizations, mantoux testing, and Child and Teen Check-ups. (J. Lowe, personal communication, June 25, 2009)

7. **1994** Saint Paul Public Schools added IEP services to their billable nursing services. (J. Lowe, personal communication, June 25, 2009)


9. **1996** Initiative developed to increase capacity at the state level for delivery of comprehensive school health to the local level with a grant from U.S. Centers for Disease Control, the Minnesota Department of Children, Families and Learning and Minnesota Department of Health. (MDH, 1997)

10. **1997** Individuals with Disabilities Act of 1997 is reauthorized by Congress allocating funding for school nurses. (Wold, 2001)

11. **1997** Medicaid reimbursement is claimed for school nursing services to children with an IEP are accessed by Saint Paul Schools. (J. Lowe, personal communication, June 25, 2009)

12. **1996** First SNOM/University of MN School of Nursing Orientation Program is provided for new school nurses. (SNOM archived records, 1961-2003)

13. **1999** Legislative mandate initiates third party billing (M.S. 125A), with rules defined in 2002. (Third Party Payment, 2009)
14. 1999 Blue Cross and Blue Shield Receives $21 million from Tobacco Settlement, “making it the largest foundation exclusively dedicated to improving the health of Minnesota residents”. (SNOM archived records, 1961-2003)

15. 1999 US Supreme Court decided that the nursing services required in decision Cedar Rapids Community School District v. Garret F. were related services under IDEA. The decision further required that school districts must provide supportive nursing services and required for Garret to attend school with supportive nursing services. (Wold, 2001)

16. 1999 SNOM website and Listserv are developed within Education Minnesota website. (SNOM archived records, 1961-2003)

17. 1999 Health Jeopardy Game is developed by SNOM Public Relations for interaction with fairgoers at the Education Minnesota State Fair booth. (Swanson & Ornelas, 2001)

2000's

Historical Focus: Continues with 1990s expansions of prevention programs and those related to chronic illness and mental health. (Wold, 2001) “As with the first school nurse, the focus is on reducing communicable disease, increasing attendance, and providing direct and indirect care and health education.” (Zaiger, 2006)

School Nurse Role: Provide case management for children with chronic health conditions including: assessment criteria, action plan development, and health outcome goals. Promote health and safety, intervene with actual and potential health problems, and actively collaborate with others to build student and family capacity for adaptation, self management, self- advocacy, and learning. The most valuable impact occurs in school nurse roles that support the students’ educational success. (Zaiger, 2006)

1. 2000 Technology advances in health offices as the majority of health records and communications are now electronic. (Denehy, 2004)

2. 2000 “Healthy Learner Asthma Initiative” began as a community-wide collaboration between Minneapolis Public Schools Health Related Services, health care providers and public health systems, and community organizations. The goals of the project were to decrease student absent days, emergency department visits, and inpatient admissions related to asthma by 50%. (Splett, Erickson, Belseth, & Jensen, 2006)

3. 2000 Minnesota Legislative mandate for school districts to bill for all IEP health related services including nursing, occupational therapy, physical therapy, speech therapy, mental health services, assistive technology, and transportation. Personal care assistant services were added later. MS 125A.21. (J. Lowe, personal communication, June 25, 2009)

5. **2003** *Helping the Student with Diabetes Succeed: Supplementary Materials for Implementation in Minnesota Schools* is authored by SNOM Diabetes Task Force. The task force collaborated with the American Diabetes Association, Minnesota Departments of Health and Education, State Board of Nursing, education and medical communities, as well as diabetes stakeholders to develop guidelines for the management of diabetes in Minnesota school settings. (SNOM Diabetes Task Force, 2003)

6. **2004** The Individuals with Disability Education Act (IDEA) was amended and specifically added School Nurse services to the definition of related services. Federal Reg. 34 CFR Part 300.34. (J. Lowe, personal communication, June 25, 2009)

7. **2005** SNOM Special Education committee presents videoconferences statewide for school nurses on special education rules and processes, the school nurse role, and reimbursement information. The SNOM website provides further provides written information, resources, and updates for school nursing practice. (“Special Education”, 2008)

8. **2005** SNOM collaborates with Department of Education to continue Annual School Nurse Orientation for new school nurses each August. (Hiltz, 2005)

9. **2005** Center for Disease Control/National Program to Promote Diabetes Education (DC/NDEP) funds Saint Paul Public Schools as a national demonstration site for a NASN project. NASN titled this program “Managing and Preventing Diabetes and Weight Gain Project” which addresses the management of Type 1 diabetes and prevention of Type 2 diabetes in children. (Schantz, 2007)

10. **2005** *Minnesota Guidelines for Medication Administration in School* is released by MDH to increase the safe administration of medications to students in Minnesota schools. (Medication Administration Guidelines Staff Team, 2005)

11. **2006** School nurses are involved in planning and developing district wellness policies as P.L. 108-265 becomes effective in June. This law requires wellness policies focused on nutrition and activity to be enacted in every school district by the start of the 2006-07 school year. (“Healthy Schools”, 2009)

12. **2006** At their annual meeting on October 20, SNOM members vote to have a unified membership and dues structure with the National Association of School Nurses. (Hiltz, 2007)

13. **2009** The World Health Organization (WHO) declared a global H1N1 flu pandemic on 6-11-09. This is the first global flu epidemic in 41 years. School nurses identify cases in schools and plan for a pandemic. (“Pandemic Flu”, 2009)
References:

A historical perspective. (September 1918). *Minneapolis Journal*.


Historical summary of health services in Minneapolis. (1-21-1980). Minneapolis Public Schools: Special Education/Health Services Archives. Minneapolis, MN.


