



National Association of School Nursing Public comments
on the
AHRQ CHIPRA Pediatric Quality Measures Program Proposed Collection

The National Association of School Nurses appreciates the invitation to comment on the agency for Healthcare Research and Quality (AHRQ) Children's Health Insurance Reauthorization Act (CHIPRA) Pediatric Quality Measures Program(CHIPRA) Proposed Collection. The CHIPRA PQMP will increase the portfolio of measures available to public and private purchasers of children's health care services, providers, and consumers.

School nurses are integral part of the system of care and are essential to achieving the quality outcomes that AHRQ is promoting and measuring for children and their families.

The proposed collection of information and the goal to improve and strengthen the initial core set of measures of pediatric / child health care quality measures is necessary for AHRQ research and health information dissemination. The CHIPRA PQMP Candidate Measure Submission form identifies the work that needs to precede the submission of the measure, and requires the submitter or the submitting agency to fully evaluate and vet whether the measure is worthy to be included in the core set of measures. It provides a roadmap of how to develop high quality and important measures of child health. Especially important is the focus on measures of preventive services, the detection of conditions that adversely affect child development and growth, and estimates of the quality of care for special needs children. Under 4) *Settings, services, measure domains, and populations addressed by the measure*, item d). specifies "ambulatory and inpatient settings where this care occurs". NASN requests that item d). be expanded to suggest schools, and other community and public health settings. A significant amount of care occurs in school health offices, as opposed to the ambulatory primary care, school based health centers. School nurses serve school aged children in 74% (~73,125) of the 98,817 nation's schools, and full time school nurses serve children in 45% (~44,467)of public schools. School based health centers serve less than 2000 schools, approximately 2% of all schools. It is important to measure the outcomes of care that result from both models of care delivery in schools and in other public health settings. Currently, by specifying only ambulatory and acute care settings, the AHRQ is potentially priming submitters to overlook data collection in cost effective and accessible settings, where 98% of school aged children spend 6 hours per day or more.

Electronic submission of the information is feasible for school health services data for the child and special needs populations. Almost 50% of NASN school nurse members are using comprehensive electronic student health records and another 28% are using electronic records for recording some aspects of care in schools.

The National Association of School Nurses is encouraged by the promise the AHRQ CHIPRA PQMP to identify gaps in the promotion of healthy behaviors. The program promises to identify innovative models of child health care delivery and measure and disseminate value of care provided outside traditional health care setting that is provided every day in communities and schools across the country.