



OFFICE OF SUPERINTENDENT OF PUBLIC INSTRUCTION
Health Services
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SCHOOL NURSE CORPS PROGRAM PARENT SURVEY 2011-12

The School Nurse Corps registered nurse (R.N.) cares for children at your school. Your child has a health condition and may take medication at school. The R.N. may have set up a health plan or trained school staff to care for your child's health needs.

Please answer the questions below to tell us how your school nurse has made a difference for you or your child. This information will help improve services to your child and may be shared with state legislators. **DO NOT SIGN YOUR NAME TO THE SURVEY.** No one will know how you personally answer the questions.

Mark an X in the appropriate box below to answer each question. **This form is to be completed and returned to the ESD, do not send to OSPI.**

	Strongly Agree	Agree	No Opinion/NA	Disagree	Strongly Disagree
1. The school nurse and I worked together to keep my child healthy at school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. I believe my child is healthier at school because of the school nurse.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. I believe my child is safer at school because of the school nurse.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. I believe my child will perform better in school because of help or planning by the school nurse.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. I believe the school nurse improves communication about my child's health needs between school, parents and healthcare providers.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. I know how to contact the school nurse if I have questions or concerns.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Comments:					