Concept for the Employment of a School Health Specialist at Klax School

1. Introduction / Definition

To enable children, young people, and all staff members at the school to live and learn in a healthy way, it is more important than ever to ensure health-promoting and health-preserving care as well as preventive health measures.

A particular focus lies on promoting health equity and the acquisition of health literacy.

The deployment of a school health specialist is a key component in establishing and strengthening these processes.

2. Objectives

The aim is to improve and ensure the quality of the education system in the area of health promotion.

This includes the following aspects:

- Acquisition of health knowledge and skills
- Improved health behaviour among the entire school community
- Ensuring a health-conscious and health-promoting school climate
- Integration of students with chronic illnesses
- Reduction of absences
- Relief for school staff
- Relief for parents or guardians
- Reduction of accidents and related costs through prevention and awareness measures
- Ensuring high-quality acute medical care

3. Measures / Tasks

To achieve the stated objectives, the school health specialist must fulfil a wide range of tasks.

These measures are regularly evaluated and adapted to current health, epidemic, or pandemic situations (e.g. guidelines from the Robert Koch Institute, STIKO, etc.).

The areas of responsibility include:

- **Acute care** and **nursing support** for chronic illnesses (e.g. after an initial diagnosis or in case of deterioration of a condition) and after longer absences due to illness
- **Health prevention** through education and counselling, including awareness campaigns and joint projects
- **Establishing and co-developing** a health-promoting school culture
- **Designing and implementing** a school health prevention concept
- Conducting **needs assessments and surveys**, supporting applications for **funding** (e.g. state program "Good Healthy School")
- **Initiating and supervising working groups** on first aid and school health services
- **Supporting school health care** (e.g. reporting notifiable infections to the local health authority according to §8 para. 1 of the Infection Protection Act, coordinating annual dental visits) in consultation with school management
- **Interdisciplinary cooperation** (e.g. with special education teachers, school psychologists, pedagogical and non-pedagogical staff); participation in internal committees, attendance at school events, and external collaboration with institutions such as child and youth health services, dental services, and child protection centres
- **Administrative duties** (documentation, accident reports, ordering materials, phone calls, scheduling appointments, meetings with students and parents, obtaining and processing consent forms for data protection, first aid measures, administering medication)
- **Ensuring a safe school environment**, e.g. checking first aid kits, participating in safety inspections with the fire safety officer, in consultation with school management
- **Networking** with other school health specialists and cooperation with external healthcare institutions, in consultation with school management

4. Legal Framework / Qualifications

According to the German Social Code VII (§21 para. 1 and 2), appropriate first aid must be ensured in school settings.

The basic qualifications ensure that the school health specialist possesses both theoretical and practical knowledge and skills necessary to fulfil the objectives and tasks.

Minimum requirements are a completed training as a registered nurse or paediatric nurse and at least 3 years of professional experience.

Additional required qualifications:

- Confident and professional demeanour
- Independent and thorough working style
- Strong communication skills, flexibility, and resilience
- Comprehensive first aid knowledge
- Intercultural competence
- Willingness to engage in interdisciplinary collaboration

Data protection plays a crucial role in the work of the school health specialist. In addition to legal requirements, data protection serves as a foundation of trust for students, parents, and all school staff.

The general data protection guidelines of the school apply.

5. Structural Requirements / Equipment

The school health specialist should have access to a room that is centrally located near the school office, barrier-free, and easily accessible for emergency services (according to workplace directive ASR A4.3).

To protect privacy, ensure compliance with data protection regulations, and maintain trust, the room should be reserved exclusively for the work of the school health specialist.

Toilet and washing facilities should be located nearby.

If possible, the room should include a front waiting and consultation area and a treatment area (with privacy screens), allowing supervision of waiting students. The front area can also be used for consultations of any kind.

Emergency medications and first aid materials must be stored appropriately and be accessible to authorized personnel during the absence of the school health specialist. Data-sensitive documents must be securely stored in lockable cabinets and on password-protected computers.

All furnishing decisions, acquisitions, and regular orders are made in consultation with school management.

6. Documentation

Timely and comprehensive documentation of all nursing measures is an essential part of the daily work of the school health specialist. Ideally, a dedicated digital documentation program designed for school health specialists should be used, ensuring compliance with all data protection requirements (e.g. “School Health Pro”, currently in the testing phase).

Documentation serves both legal protection and as a useful tool for tracking illness progression and understanding treatment pathways in case of long-term effects.

It also facilitates interdisciplinary discussions and contributes to the evaluation process.

For every incident requiring first aid, documentation must be completed promptly in the DGUV reporting log (e.g. DGUV Information 204-021). If further medical treatment is required, an accident report must also be submitted to the relevant accident insurance provider. These records must be retained for at least five years (§24 para. 6 DGUV Regulation 1).

7. Sources

- *German Social Accident Insurance (Deutsche Gesetzliche Unfallversicherung, DGUV)*
- *Federal Institute for Occupational Safety and Health (Bundesanstalt für Arbeitsschutz und Arbeitsmedizin)*
- *Accident Insurance Funds and Professional Associations (Unfallkassen und Berufsgenossenschaften, UK/BG)*
- *German Professional Nursing Association (Deutscher Berufsverband für Pflegeberufe, DBfK)*
- *AWO District Association Potsdam e.V. (AWO Bezirksverband Potsdam e.V.)*
- *TransMIT Project Division for Health Prevention and Promotion (TransMIT Projektbereich für Gesundheitsprävention und -förderung)*
- *German Social Code, Book VII (Sozialgesetzbuch VII)*