Pediatricians and School Nurse Partnerships:

“Every Pediatrician is a School Physician”

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Hello!
The speakers have no relevant financial relationships to disclose and will not discuss off label use or investigational use in this presentation.
All I ever needed to know, I learned in Kindergarten by Robert Fulghum

“Most of what I really need to know about how to live, and what to do, and how to be, I learned in kindergarten. Wisdom was not at the top of the graduate school mountain, but there in the sandbox at nursery school. These are the things I learned.”
“Share everything. Play fair. Don't hit people. Put things back where you found them. Clean up your own mess. Don't take things that aren't yours. Say you are sorry when you hurt somebody. Wash your hands before you eat. Flush.”
“Warm cookies and cold milk are good for you. Live a balanced life. Learn some and think some and draw some and paint and sing and dance and play and work everyday. Take a nap every afternoon.”
“When you go out in the world, watch for traffic, hold hands, and stick together. Be aware of wonder. Remember the little seed in the plastic cup? The roots go down and the plant goes up and nobody really knows how or why. We are like that.”
“Think of what a better world it would be if we all, the whole world, had cookies and milk about 3 o'clock every afternoon and then lay down with our blankets for a nap. Or we had a basic policy in our nation and other nations to always put things back where we found them and clean up our own messes.”
“And then remember that book about Dick and Jane and the first word you learned, the biggest word of all: LOOK! Everything you need to know is there somewhere: The Golden Rule and love and basic sanitation, ecology, and politics and the sane living. “
“And it is still true, no matter how old you are, when you go out in the world, it is best to hold hands and stick together.”
THEMES:
-School Nurses in 2022
-Pediatricians in 2022
-What we do and how we can do it better together
You can access all the resources we reference on the MCAAP. ORG website:

Just relax and listen and know that you can see these school health tools and more at our website. We'll be sharing with MSNO too!
Whole School, Whole Community, Whole Child (WSCC)

A collaborative approach to learning and health.
Framework for 21st Century School Nursing Practice™

STANDARDS OF PRACTICE

Community/Public Health

Leadership

Quality Improvement

Care Coordination

Family and School Community

Healthy, Safe, Ready to Learn

Students

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Rev. 10/6/16
Framework for 21st Century School Nursing Practice™

NASN’s Framework for 21st Century School Nursing Practice (the Framework) provides structure and focus for the key principles and components of current day, evidence-based school nursing practice. It is aligned with the Whole School, Whole Community, Whole Child model that calls for a collaborative approach to learning and health (ASCD & CDC, 2014). Central to the Framework is student-centered nursing care that occurs within the context of the students’ family and school community. Surrounding the students, family, and school community are the non-hierarchical, overlapping key principles of Care Coordination, Leadership, Quality Improvement, and Community/Public Health. These principles are surrounded by the fifth principle, Standards of Practice, which is foundational for evidence-based, clinically competent, quality care. School nurses daily use the skills outlined in the practice components of each principle to help students be healthy, safe, and ready to learn.

Standards of Practice
- Clinical Competence
- Clinical Guidelines
- Code of Ethics
- Critical Thinking
- Evidence-based Practice
- NASN Position Statements
- Nurse Practice Acts
- Scope and Standards of Practice

Care Coordination
- Case Management
- Chronic Disease Management
- Collaborative Communication
- Direct Care
- Education
- Interdisciplinary Teams
- Motivational Interviewing/Counseling
- Nursing Delegation
- Student Care Plans
- Student-centered Care
- Student Self-empowerment
- Transition Planning

Leadership
- Advocacy
- Change Agents
- Education Reform
- Funding and Reimbursement
- Healthcare Reform
- Lifelong Learner
- Models of Practice
- Technology
- Policy Development and Implementation
- Professionalism
- Systems-level Leadership

Quality Improvement
- Continuous Quality Improvement
- Documentation/Data Collection
- Evaluation
- Meaningful Health/Academic Outcomes
- Performance Appraisal
- Research
- Uniform Data Set

Community/Public Health
- Access to Care
- Cultural Competency
- Disease Prevention
- Environmental Health
- Health Education
- Health Equity
- Healthy People 2020
- Health Promotion
- Outreach
- Population-based Care
- Risk Reduction
- Screenings/Referral/Follow-up
- Social Determinants of Health
- Surveillance


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BETTER HEALTH. BETTER LEARNING.™

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Special Needs

- Physical
  - G-tubes
  - Traches
  - Catheters
  - Braces
  - Central Lines
  - Medications
  - Life saving supports

- Psychological
  - ADHD
  - OCD
  - ACEs
  - Depression
  - Suicide
  - Addiction

- Social
  - Immigrants
  - Refugees
  - Homeless
  - Food insecurity
  - Abuse
  - Neglect
How do school nurses support these students?

- Medications
- Treatments
- Education
  - Students
  - Staff
  - Families
- Development of comprehensive care plans
- Emergency plans
- Advocacy
- Team work within the school
  - 504 Plans
  - IEPs
- Collaboration with
  - Medical homes
  - Specialists
  - community agencies
  - Social workers
  - Counselors
  - Community Safety
    - Police
    - Fire
The Patient-Centered Medical Home

from Oregon.gov
Bi-directional Communication

Medical Home
Providing coordinated care for CYSHCNs
PCC, ADHD Care Coordinator

Patient/Family
Subspecialists
Behavioral Therapists
Community Agencies
Pharmacists
School Nurses
Social Workers
School Psychologists

A Medical Home Fits In a Medical Neighborhood
Tear down the false communication barriers that keep us in our silos.

Sample fax form includes office staff names, roles, and best times/methods for communication.
Learn and follow the rules of the game

• Medication orders – updated annually and with changes
• Know your local school district’s concussion protocol and forms for it.
• Physicals should be completely filled out
• SPOT Vision screener is for under 6
• School Entry Requirements (Grades, K, 4, 7 and 10)
• Diligence in entering vaccinations into the MIIS system so that we can access them.
• PE should include vision and lead screenings for K
• Encourage families to share documents (PE, Immunizations) with school nurse - some people think they are automatically sent.
• Attend virtual/in-person nursing team meetings to provide health updates, discuss health trends and review clinical updates
• Partnership is important and we need a united front when dealing with some families.
• Phone calls/conversations for complicated cases
• Rise in mental health issues is concerning - how can we collaborate on this public health concern?
• Please do not “excuse” absences unless they have actually laid eyes on the child.
• Set up collaborative relationship between practice Nurse Managers and district Nurse Leaders

• My district has many undocumented students with no documentation and no insurance; we struggle to find access to vaccine clinics, medication orders, access to medications, etc. They should know this should be a community effort in providing for our students.
• Realize that when a parent reports “what the school nurse said”, it may not be exactly “what the school nurse said”
• We can’t control if a parent overreacts and brings their child in for every single ailment. They may not be well enough to be in school but they more than likely are fine to stay home for the day. We are not trying to create more work for their office but we are trying to keep viruses from spreading in the classroom, which in turn may decrease their overall sick visits.
The Anatomy of the Massachusetts School Health Record
What if a known condition causes symptoms during school? Don’t you want professional HCWs to know?

Medication effects happen at anytime, even if the med is given before or after school. If 1st responders are called in, you want them to know what medication the youth takes.
Do you know that student athletes need this exam annually and that the periodicity varies by school level? See https://tinyurl.com/mun4ffu7

Don’t forget the BMI and BP!

Follow Bright Futures periodicity schedule https://brightfutures.aap.org/Pages/default.aspx
Include the DATE and RESULTS of tests!

This can really help children get services!

Whether on paper or digital, a signature with degree is required. Make sure Portal copies have digital signatures!

TB risk level or result REQUIRED!
PRN WHAT??? What parameters is the nurse assessing?

All medication orders expire at the end of the school year or with change of dosage. Note start date and the term of the treatment here.

<table>
<thead>
<tr>
<th>School Medication Order Forms are required for all prescription medications to be administered at school. A guardian’s signature is required for all students under 18.</th>
<th>Sample Medication Order Form</th>
</tr>
</thead>
<tbody>
<tr>
<td>(to be completed by a licensed prescriber)</td>
<td>Name of Student ___________________________ Date of Birth ________________</td>
</tr>
<tr>
<td>Address: (street) (city/town)</td>
<td>Grade ________________</td>
</tr>
<tr>
<td>Name of Licensed Prescriber ___________________________ Title ________________</td>
<td>Business Phone ________________ Emergency Phone ________________</td>
</tr>
<tr>
<td>Medication: ___________________________</td>
<td>Route of administration: Dosage ________________</td>
</tr>
<tr>
<td>Frequency: ___________________________ Time(s) of Administration: (Please note: Whenever possible, medication should be scheduled at times other than school hours.)</td>
<td>Specific directions or information for administration:</td>
</tr>
<tr>
<td>Date of Order ________________ Discontinuation Date ________________</td>
<td>Diagnosis* ___________________________</td>
</tr>
<tr>
<td>Any other medical condition(s)* ___________________________</td>
<td>Optional Information</td>
</tr>
<tr>
<td>1. Special side effects, contraindications, or possible adverse reactions to be observed:</td>
<td>2. Other medication being taken by the student:</td>
</tr>
<tr>
<td>3. The date of the next scheduled visit or when advised to return to prescriber:</td>
<td>4. Consent for self-administration (provided the school nurse determines it is safe and appropriate): Yes____ No____</td>
</tr>
<tr>
<td>Signature of Licensed Prescriber ___________________________</td>
<td></td>
</tr>
</tbody>
</table>

* if not in violation of confidentiality.
Learn how to share:

When you enter vaccinations in the MIIS system, you help the medical neighborhood provide timely care to your patients. School nurses can access MIIS.

Encourage families to share documents (school forms, etc.) with school nurse - some people think they are automatically sent. Unless you send them explicitly, they are often not handed in.
Know what game you are playing.
Remember the game “Operator”? Realize that when a parent reports “what the school nurse said”, it may not be exactly “what the school nurse said”.

And vice versa!
BUILD YOUR CONTACT LIST and PICK UP THE PHONE
Discussion Time