

WISCONSIN DEPARTMENT OF PUBLIC INSTRUCTION

# School Nurse

#### #14 March 24, 2022

#### Welcome to Spring!

I chose the picture for this newsletter to both embrace spring in Wisconsin and to acknowledge the Ukrainian crisis. While I watch the horror unfold on my TV, I received an email from a school nurse trying to assist a foreign exchange student from Ukraine. I was able to connect her to the consultant on DPI's Teaching and Learning team that could offer some suggestions. I can only imagine how frantic are the student and the student's Ukrainian and host families! School nurses show up in the most unexpected places. Thank for always showing up! See the resources this consultant suggested in DPI News (p. 3).

Some of you have experienced Spring Break, while some have yet to enjoy the welcomed reprieve. Relax and know you have not missed any new guidance or recommendations in the past two weeks. Though I did have an epic COVID-related experience last week. I spoke directly to Dr. Rochelle Walensky (CDC Director) in a STAT Zoom meeting! I questioned her when the CDC would update the school-specific guidance and suggested it include clarification regarding contact tracing and how the CDC envisions school-based testing in the future. We shall see if the CDC takes my requests into consideration. ©

This week is **Poison Prevention Week** (pp. 5 & 15). Since some of you may be doing "puberty presentations" in the upcoming weeks, I shared two articles HG&D related to COVID (pp. 4 & 5). It is also **National Drug & Alcohol Facts Week**® (p. 10)

Included in this newsletter is specific information on how to register for the Wisconsin Association of School Nurses' conference. It would be great to see you in person. Stephanie Poling will share how DHS is using the Public Health Workforce money to support school nurses. I'll be giving my usual DPI presentation alongside many other excellent speakers.

#### **FEATURED STORIES**

PRACTICE POINTS – School Health Services During Summer School

Human Trafficking (p. 2)

Podcast Supporting Students with Long COVID (p. 9)

Asthma Resources (p. 10)

#### **SAVE THE DATE**

Next DiSH-WI Session – April 20, 2022

School Nurse Network Meeting – April 19, 2022 3:30-4:30 PM

WASN Spring Conference – April 28-29, 2022 – Green Bay, WI

NASN Annual Conference In-person June 28-30 Atlanta GA Virtual July 11-13.

### **DPI News**

#### **New Resources Posted to School Nursing Webpages**

Several new resources have been posted to the DPI School Nursing webpages over the past two weeks. Below is a listing:

Sample Spanish Parent Meningococcal Disease Information Letter Several new head lice resources under the Head Lice tab. https://dpi.wi.gov/sspw/pupil-services/school-nurse/resources

Optional Valtoco® Intranasal Seizure Medication Training Video Baqsimi® demonstration video

<u>Diabetes in School Health (DiSH)</u> - UW School of Medicine and Public Health

Department of Pediatrics

Restarting Safe Education & Testing For Children with Medical Complexity Reset Family Decision-Making Tool



A free virtual event presented in partnership with DPI, DCF, the WISH Center, and Fresh Start Learning.

APRIL 28, 2022 1:00 PM-2:30 PM OR MAY 18, 2022 9:00 AM-10:30 AM

Register for one session (Registration is limited, and sessions are NOT recorded.)

In this workshop, school professionals will learn more about how victims get in and stay in human trafficking situations, as well as how survivors get out and stay out.

#### Participants will:

- be able to describe the common coercion process in trafficking
- identify signs of dual identity within trafficking victims
- explore best practices for speaking to a survivor's true self
- practice a motivational communication skill: OARS.

Presenter Nancy Yarbrough is the Lived Experience Coach and Executive Director of Fresh Start Learning, Inc. Nancy is a captivating speaker who brings years of experience including through her work with young people currently involved in trafficking. This session is recommended for pupil service staff, and any adult supporting youth with complex needs in schools.

The online sessions will **not** be recorded. Please join ready to engage and learn how to boost your skills as an advocate for youth.



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## **DPI News**

#### Talking to Students About the War in Ukraine

School nurses are often one of the first healthcare professionals in schools to see signs of anxiety and stress. The <u>National Association of School</u>

<u>Psychologists</u> (NASP), and the <u>American School Counseling</u>

<u>Association</u> (ASCA), have resources for educators and caregivers focused on supporting children and youth in addressing the stressors related to the conflict in Ukraine.



#### Information to Assist Ukrainian Foreign Exchange Students

There is a Ukrainian embassy in Chicago.

https://embassies.info/ConsulateofUkraineinChicagoIllinois Try calling and emailing. Their phone lines may be busy. The students should receive an emergency phone number for the U.S. Department of State from the organization that sponsored her visa. It is typically on their ID card or I20 documentation. That service number should have up to date information on what is possible. The State Department's website also has links and contact information at: https://jlvisa.state.gov/

The student's visa sponsor should provide direct support. If they are not doing so, the student may contact the State Department using this number and email: 1-866-284-9090 or at jvisas@state.gov.

#### **Tornado and Severe Weather Awareness Week**

Our partners at Wisconsin Emergency Management would like to announce <u>Tornado and Severe Weather Awareness Week</u> in Wisconsin will take place April 4-8 this year. This annual campaign encourages everyone in Wisconsin to prepare for the tornadoes and severe storms in the state that may develop during the spring and summer months. This is also a good opportunity for school administrators, safety officers, and faculty to review their severe weather safety procedures by participating in statewide tornado drills at 1:45 p.m. and 6:45 p.m. on April 7. <u>Please click here for more information</u>.

Inclusive Strategies to Address Behavioral Needs for Students w/IEPs April 13 | 12:00-1:00 pm Wisconsin FACETS' Webinar

This presentation will highlight strategies and resources to help adults support students with IEPs who have behavioral needs in educational settings.

Presenters: Tim Peerenboom, Education Consultant, WI Department of Public Instruction and Eva Shaw, Special Education Consultant, WI Department of Public Instruction Register for webinar.

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## **DHS News**

#### **Respiratory Report**

The Weekly Respiratory Report for the week ending on March 5, 2022 (Week 9) is now published.

#### **DHS Confirms Three Pediatric Influenza-Associated Deaths**

The Wisconsin Department of Health Services (DHS) has confirmed the deaths of three children under the age of 18 due to complications from <u>influenza</u>. These are the first reported pediatric influenza-associated deaths in Wisconsin for the 2021-2022 season.

"DHS is deeply saddened to report these flu deaths in Wisconsin this influenza season," said State Health Officer Paula Tran. "It is important to remember that along with COVID-19, other communicable diseases such as flu are circulating in our communities. Each of these alone can pose serious health risks for children, and co-infection can occur. It is not too late for Wisconsinites to get vaccinated to protect themselves and others."

With the number of flu cases and hospital admissions rising throughout the state, DHS encourages Wisconsinites to get vaccinated. The flu vaccine is the best way to prevent severe illness associated with the influenza virus. Everyone over six months of age is recommended to get the flu vaccine. Specifically, it is highly recommended for people who are at greater risk of becoming seriously ill, such as those who are pregnant, over age 65, and those with chronic health conditions. DHS recommends Wisconsinites talk with a health care provider if they have questions about the flu or getting vaccinated. It is never too late to get a flu shot.

View the entire news release.

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### $\bigcap$

## What You Need to Know About COVID-19 Vaccination and Fertility

 There is currently no evidence that any vaccines, including COVID-19 vaccines, cause fertility problems (problems trying to get pregnant) in women or men.

Link to CDC webpage

# Children's Safety Network

#### March 20-26, 2022, is National Poisoning Prevention Week.

During the first year of the COVID-19 pandemic, poison control centers saw an <u>almost 30 percent increase</u> in reported poison encounters. In 2020, there were <u>over 1.1 million reports</u> of poison exposures in children under the age of 20.

March is also <u>Brain Injury Awareness Month</u>. <u>Traumatic brain injury (TBI)</u> is a condition caused by a bump, blow or jolt to the head which disrupts normal brain function. Every year, <u>nearly 700,000</u> TBI-related emergency visits, hospitalizations, and deaths occur in children ages 0-19.

National Institute of Health

## COVID-19 vaccines linked to small increase in menstrual cycle length

- Women who received COVID-19 vaccines had a less than oneday increase in the length of their menstrual cycles around the time of their doses.
- The findings suggest that women may have a slightly longer menstrual cycle after COVID-19 vaccination, but the change is temporary and within the range of normal variation.

Read article.

# HealthyChildren.Org

#### **COVID-19 & Other Respiratory Illnesses: How Are They Different?**

Let's look at the viruses that cause four common childhood illnesses—COVID-19, flu, the common cold and respiratory syncytial virus.

All of them share some similar symptoms. This can make it hard to tell them apart. Here are some clues that help your pediatrician figure out what kind of respiratory illness is making your child sick. Read more.



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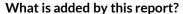
## MMWR

Hospitalization of Infants and Children Aged 0-4 Years with Laboratory-Confirmed COVID-19 — COVID-NET, 14 States, March 2020–February 2022

Summary

#### What is already known about this topic?

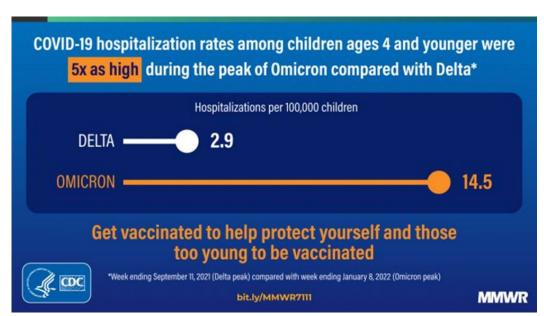
COVID-19 can cause severe illness in infants and children, including those aged 0–4 years who are not yet eligible for COVID-19 vaccination.



During Omicron variant predominance beginning in late December 2021, U.S. infants and children aged 0–4 years were hospitalized at approximately five times the rate of the previous peak during Delta variant predominance. Infants aged <6 months had the highest rates of hospitalization, but indicators of severity (e.g., respiratory support) did not differ by age group.

#### What are the implications for public health practice?

Important strategies to prevent COVID-19 among infants and young children include vaccination of currently eligible populations such as pregnant women, family members, and caregivers of infants and young children. Read report.





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## MMWR

# Rate of Unintentional Traumatic Brain Injury-Related Deaths Among Persons Aged ≤19 Years, by Age Group and Sex — National Vital Statistics System, United States, 2018-2020

During 2018–2020, death rates for unintentional traumatic brain injury among persons aged  $\leq$ 19 years were higher for males than for females in each age group. Rates were highest for males (6.1 per 100,000) and females (2.9) among persons aged 15–19 years. Rates were lowest for males and females aged 5–9 years (1.1 and 0.8, respectively) and for males and females aged 10–14 years (1.3 and 0.8, respectively). Read report.



## Duration of Infectious Virus Shedding by SARS-CoV-2 Omicron Variant-Infected Vaccinees

Abstract

To determine virus shedding duration, we examined clinical samples collected from the upper respiratory tracts of persons infected with severe acute respiratory syndrome coronavirus 2 Omicron variant in Japan during November 29–December 18, 2021. Vaccinees with mild or asymptomatic infection shed infectious virus 6–9 days after onset or diagnosis, even after symptom resolution. Read article.

# Prevent Blindness Wisconsin

#### **Share Vision Screening Data**

Prevent Blindness Wisconsin is collecting vision screening numbers! If your school district provided vision screenings during the 2021-2022 school year, please share your screening results here (hyperlink: <a href="https://wisconsin.preventblindness.org/submit-vision-screening-results/">https://wisconsin.preventblindness.org/submit-vision-screening-results/</a>). These numbers help us analyze statewide trends, capture accurate screening information for Wisconsin, and understand where more support is needed. For questions, please email Shelby at <a href="mailto:shelby@pbwi.org">shelby@pbwi.org</a>. See sample report form attached to this newsletter.

Please share your screening results.
These numbers help us analyze statewide trends, capture accurate screening information for Wisconsin, and understand where more support is needed.

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## **WASN News**

We are excited to welcome you back for the 2022 Wisconsin Association of School Nurses Spring Conference IN PERSON at the Radisson Hotel & Conference Center, Green Bay! Register.



| 2022            | WASN Member | Non-Member | Student |
|-----------------|-------------|------------|---------|
| Thursday Only   | \$150       | \$175      | \$25    |
| Friday Only     | \$100       | \$125      | \$25    |
| Full Conference | \$225       | \$275      | \$50    |
| (R-F)           |             |            |         |

Check out the conference web page to find ...

- a preliminary schedule of keynote, plenary, and breakout sessions and
- conference room block details (it's not too early to make your hotel reservation!).

The conference web page will be updated as more details are available, so check back often!

#### **ACCOMMODATIONS**

- Standard rooms are available for Tuesday, April 26, 2022, to Thursday April 28, 2022, at the rate of \$109/night (NEW RATE!).
- A credit card is required to make a reservation, but you will not be charged until you check out.
- Deadline to reserve at this rate: Wednesday, April 6

To receive the discounted room rate, call 920-494-7300, and identify yourself as a conference attendee for the Wisconsin Association of School Nurses (WASN) Conference.

Questions? Please contact Megan at megan@wisconsinnurses.org.

## **NASN News**

#### **NASN March Podcast: Supporting Students With Long COVID**

School-age children are not immune to COVID-19 or the pronounced and persistent symptoms associated with a long-COVID diagnosis. Students may present with a variety of symptoms affecting their physical, cognitive, and mental health. The school community should be educated on the school-based interventions and recommendations for creating an individualized safe and successful return to school plan. In this podcast, hear NASN *School Nurse* Editor Cynthia Galemore interview authors Megan Roesler and Patricia Fato about the article, "Long COVID - The New "Invisible" Illness: How School Nurses Can Support the Nursing and Educational Teams for Student Success." Listen to the podcast.



#### **Assessing Substance Abuse Risk in Students**

The NASN learning module provides learners with an understanding of the CRAFFT 2.1 and CRAFFT 2.1+N assessment tools geared toward school-age students to assess potential substance and nicotine use and/or abuse. Content includes the importance of maintaining student confidentiality, the different risk levels identified in the assessment tool, how to administer the assessment tool in the school setting, and reflecting on how to change daily practices. 1.5 NCPD CNE. Register.

## Using the WSCC Model to Implement Wellness Policies and Sustain Chronic Health Condition Management in Schools

School nurse involvement when school wellness policies are developed is critical to ensure the overall health and well-being of students are addressed – beyond nutrition and physical activity. The 'gold standard' model school wellness policy developed by the Alliance for a Healthier Generation was updated in June 2020. This course offers information on the updated model wellness policy that now includes recommended language to address all 10 components of the Whole School, Whole Community, Whole Child (WSCC) Model and the new (2020) NASN supplemental language to address chronic health condition management – positioning the school nurse to be able to fully participate when schools review and refresh current school wellness policies. Learn more and complete the course.

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## Allergy & Asthma Network

#### Managing Asthma at School: Newly Updated Resources!

Asthma is the No. 1 reason for children missing school. Parents and school staff can create a positive school environment for children with asthma by managing triggers and medications effectively.

Check out our videos, infographics, downloadable resources, and more.

A Guide for Parents

A Guide for Schools



Two years after the start of the COVID-19 pandemic, there is cautious optimism that an end is in sight. What happens next? Medical experts say we will shift into an endemic phase. What does that mean? Will we need an annual COVID booster shot? Will we still wear masks? Read more

'From Pandemic to Endemic' Webinar: Watch Now!

#### **5 Myths About Spring Allergies**

Many people believe moving to a drier climate like the U.S. Southwest can cure pollen allergies, but here's the truth: there is no true allergy-free zone. Let's debunk more common myths around spring allergies. Read more

All About Pollen -- and How to Avoid It

# National Institute on Drug Abuse

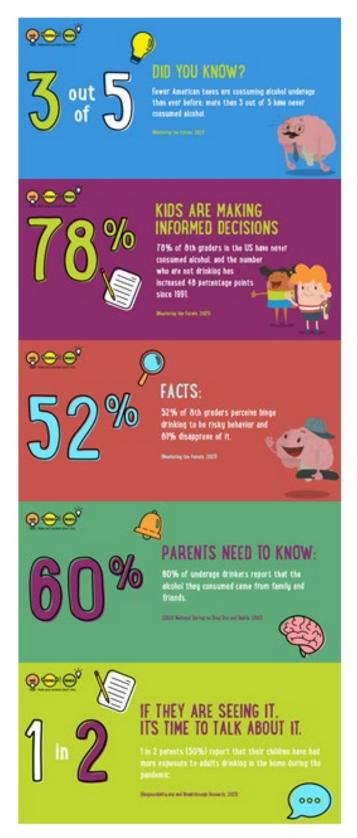
#### March 21-27, 2022, National Drug & Alcohol Facts Week®

For more than a decade the National Institute on Drug Abuse's National Drug & Alcohol Facts Week educational campaign has been working with state-based partners and like-minded organizations to share NIDA's science-based resources in hopes they find them useful and engaging. For more information, please visit NIDA's National Drugs and Alcohol Facts Week page.



Asthma is the No. 1 reason for children missing school. Parents and school staff can create a positive school environment for children with asthma by managing triggers and medications effectively.

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## Miscellaneous

#### Invitation to Share Your Wisconsin School Nurse Story

Hello Wisconsin School Nurses,



I am inviting you to share your story about how the pandemic has impacted you and your school nurse practice. As I began to hear the stories shared by the nurses participating in the <u>A Day in the Life Photo Essay: Wisconsin School Nurses and the COVID-19 Pandemic project</u> I wondered if all Wisconsin school nurses would like an opportunity to share their story. In an effort to facilitate this opportunity I have created an <u>online survey</u> using the interview questions asked of the school nurses participating in the photo essay project. I do not know what will come of the responses shared in this survey but she envisions that the responses will be summarized and shared with school nurses in the form of a journal article, blog post, and/or breakout session at a future WASN/NASN conference.

The questions included in the survey were developed as part of the *A Day in the Life Photo Essay: Wisconsin School Nurses and the COVID-19 Pandemic* project. One of the goals of the project was to create a space that would allow school nurses to tell their story. The project partners and I hope the school nurses' stories would provide the public with a better understanding of the physical and emotional toll the pandemic has had on school nurses. The goal of the project is to acknowledge and honor the role that school nurses played, historically and during the COVID-19 pandemic, to support the health and education of students.

Your responses to this survey will be confidential. I will not disclose the names of the nurses nor the school districts that participated in the survey. Only I will have access to the survey responses. The responses will be reviewed and summarized to identify themes. Individual quotes may be included in a journal article, blog post, or presentation but the nurse's name nor school district will not be disclosed.

This survey is not being done for the purposes of research. The first eight questions regarding demographics require an answer but for the remainder of the questions you can choose to answer or skip any of the questions.

You do not have to complete the <u>survey</u> in one sitting. You can return at a later date to finish. If you need to stop the survey and finish later just hit the submit button at the bottom of the page. You will receive an email with a link that you can use to return to the survey to edit your previous answers and respond to questions that you have not yet answered or delete responses you previously answered.

If you have any questions about the survey or the A Day in the Life Photo Essay: Wisconsin School Nurses and the COVID-19 Pandemic project please feel free to email Teresa DuChateau at <a href="mailto:Teresa@SchoolHealthAssociates.com">Teresa@SchoolHealthAssociates.com</a>

## Miscellaneous

#### **National Poison Prevention Week 2022**

National Poison Prevention Week (NPPW) is the third full week in March each year. It's a week dedicated to raising awareness of poison control centers and the Poison Help Hotline (1-800-222-1222). NPPW 2022 is March 20-26, 2022. School nurses can post and share <u>resources</u> in their schools. All events will be available to view on <u>AAPCC's</u> Facebook page here.



## Are pandemic-related stressors impacting uninfected people's brain health?

New research indicates that for some individuals – even those who have steered clear of becoming infected with SARS-CoV-2 – societal and lifestyle disruptions during the COVID-19 pandemic may have triggered inflammation in the brain that can affect mental health. Read article.

#### **Medscape Blogs Stop Calling Children Resilient**

Interesting and thought provoking. Read article.

#### For kids with COVID-19, everyday life can be a struggle | AP News

A hard-to-read, but incredibly important read in AP News. Because of COVID, kids are "are losing parents, social lives, entire years. Yes, kids are resilient, but they can't go on like this. No one is this resilient." Read article.

#### **Philips Recalls AED Pads**

See recall information attached to this newsletter. Bothe M5071A (adult) and M5072A (infant/child) pads for use with HS1/OnSite/Home AEDS may experience gel separation and reduction of gel surface area.



#### COVID-19 Vaccination for Children and Teens Website

CDC posted <u>this new webpage</u> summarizing COVID-19 vaccination for children and teens.

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# National Association of State School Nurse Consultants



## Survey to Measure Impact of COVID Pandemic on School Nurse Mental Health

School nurses are invited to participate in this <u>survey</u> conducted by the Centers for Disease Control and Prevention in collaboration with the National Association of School Nurses and the National Association of State School Nurse Consultants.

The goal of this project is to evaluate experiences and protective factors during the pandemic and their impact on school nurses' mental health. All school nurses who currently work or worked in schools during the 2021/2022 school year (since August 2021) are eligible to participate. In order to participate, you either 1) are currently employed as a school nurse, or 2) were employed as a school nurse at any time during the Fall 2021 and/or Spring 2022 school terms.

Your participation in this timely and important project will help provide insight into experiences, stressors, and protective factors among school nurses during the COVID-19 pandemic. By providing information on your experiences during the COVID-19 pandemic, you will help inform key stakeholders so they can take appropriate actions.

Information collected in this survey is anonymous and cannot be traced back to you. Your responses will be presented at the group level only. Completing this survey is voluntary and should take about 15 minutes to complete.

If you have questions regarding the project, please contact the survey team at <a href="mailto:eocevent335@cdc.gov">eocevent335@cdc.gov</a>.

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## PRACTICE POINTS

By Louise Wilson

#### **School Health Services During Summer School**

Districts are preparing for what is hoped to be more traditional summer programming. For many districts this means the return or expansion of "Summer School" placed on pause or modified due to the pandemic. I've written and presented on this topic before, but I also realize there are many new to the specialty of school nursing and some veteran school nurses may need a refresher in the nuances of providing health services over the summer.

The increase in the number and acuity of students with chronic, acute, and sometimes life-threatening health conditions has created issues for school districts not only during the normal school year, but also for summer school. I receive many phone calls from school nurses and administrators as both grapple with the needs of students attending summer school. Most students attend summer school on a voluntary basis. This adds to the confusion of what services are required to be provided.

Extended School Year (ESY) and Summer School are not the same. School districts are required to provide ESY services to special education students if they are necessary to provide the student with free appropriate public education (FAPE). This determination is made by the IEP team, and it is written into the IEP. This may also include the need for "related services." A school district may provide related services as the sole component of an ESY program (DPI, 2010).

Summer school classes are not special education, because they are not required; they are not based upon the child's individual needs; and they do not require an IEP. In contrast to ESY services, summer school classes are not required in order for a child to receive FAPE (DPI, 2010).

Laws that are applicable to providing health services during summer school include:

- Chapter PI 8 SCHOOL DISTRICT STANDARDS (Standard G)
- Chapter 441 Wisconsin Nurse Practice Act
- Chapter N 6 Standard of Practice for Registered Nurses and Licensed Practical Nurses



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<u>Chapter PI 8</u> School District Standards (Standard G) requires that each school district board provides emergency nursing services under a written policy that includes protocols for dealing with student accidental injury, illness and administration of medication "at all school sponsored activities including but not limited to curricular, co-curricular and extra-curricular activities." The services must be available "during the regular school day and during all school sponsored activities."

School nurses need to consult with their district administrators to determine if the activities that students will be involved in are sponsored by the school or sponsored by other organizations with the school only providing publicity and/or access to its buildings. If summer school is determined to be "a school sponsored activity" then provisions must be made for first aid, medications, and any health care procedures the students attending require. This holds true even if attending summer school is "voluntary."

The same medication practices are followed during summer school as during the school year unless summer school is specifically addressed in district policy. School nurses are encouraged to review their district medication policy and procedures to determine if the school nurse is actually delegating medication administration to unlicensed staff or instead provides professional counsel to administrators who themselves are responsible for medication administration under <a href="Wis. Stat. sec. 118.29">Wis. Stat. sec. 118.29</a>. The law was crafted many decades ago to allow medication administration to students by bus operators, school staff, and volunteers without being in violation of "practicing nursing without a license." School districts' medication policies may support this interpretation or may include a narrower approach and hold the school nurse accountable and therefore require the use of delegation principles.

If there are health care procedures that must be done during summer school that were considered delegated nursing acts during the school year, the same principles of delegation must be followed. Here school nurses and school district administrators are guided by <a href="Chapter 441">Chapter 441</a> which defines the practice of professional nursing. <a href="Chapter N 6">Chapter N 6</a> provides further guidance in that it articulates what are "basic" versus "complex" nursing care and situations. Chapter N 6 reminds school nurses that the only part of the nursing process that can be delegated is implementation. The processes of assessment, planning, and evaluation cannot be delegated. Chapter N 6 is also where supervision is defined.

The professional school nurse assigns or delegates nursing tasks based upon:

- needs and condition of the student
- potential for harm
- stability of the student's condition
- complexity of the task
- predictability of the outcomes
- abilities of the staff to whom the task is delegated
- the context of other student needs

As a professional registered nurse, the school nurse must follow the five rights of delegation just as other RN's in other settings. These include:

- Right Task
- Right Circumstance
- Right Person
- Right Directions/Communication
- Right Supervision and Evaluation

The two rights of delegation that create issues particularly regarding summer school are the right communication and right supervision/evaluation. If there are complicated health action plans that require staff to be knowledgeable in how to respond, or procedures that require staff to be trained, the school nurse must be given adequate time before the start and at the beginning of summer school to accomplish that training. Determining how districts and school nurses will accomplish that may require serious discussions. Equally important is that the school nurse must be allotted time to fulfill their professional obligation to provide supervision to staff performing procedures under the legal protection of the RN's license. Additionally, the school nurse must be able to evaluate the effectiveness of the procedure or care plan and be able to make changes or adjustments. This is not possible if the school nurse is only given hours at the beginning of summer school.

As ongoing communication is required for student safety when procedures are being performed or students are attending summer school with life-threatening health conditions, plans must include who is available to answer questions or concerns as they arise. It could be the school nurse as part of the delegation process; or the plan could be to call the parent or emergency medical services (EMS).

Based upon the individual situation it is possible for a school nurse to fulfill their professional and legal obligations under delegation and not work every day or every hour of summer school. This depends on many factors and should be part of the frank discussion. "Any decision to delegate a nursing responsibility must be based on the needs of the patient or population, the stability and predictability of the patient's condition, the documented training and competence of the delegate, and the ability of the licensed nurse to supervise the delegated responsibility and its outcome, with special considerations to the available staff mix and patient acuity." (National Council of State Boards of Nursing, 2016)

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#### Final key points to consider:

- Decision to delegate is based on safety and welfare of the student, not on expediency or cost.
- School nurse must decide whether a specific nursing task can be legally delegated according to the state nurse practice act.
- School nurse must perform nursing assessment of student and develop plan of care that outlines required nursing services during school hours and school-sponsored activities.
- School nurse must determine if UAP is willing and competent to perform the delegated activity correctly, following appropriate training.
- UAP must accept assignment and responsibility.
- If task requires nursing assessment or nursing judgment the task cannot be delegated.
- Regular supervisor and evaluation of the delegatee by school nurse is required.
- Documentation of training by school nurse of UAP training, competency and periodic supervision is required.
- Documentation by UAP of tasks performed is required.

Determining safe staffing of summer school to protect the health of students while respecting and following the legal requirements of the Nurse Practice Act can be challenging. I suggest administrators and school nurses have frank discussions over the concerns and be willing to explore multiple possibilities. Additionally, I refer readers to the National Association of School Nurse's position statement <u>Schoolsponsored Before</u>, <u>After</u>, <u>and Extended School Year Programs - The Role of the School Nurse</u> (2018).



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This publication is available from: Learning and Support Student Services Prevention and Wellness Team (608) 266-8857 https://dpi.wi.gov/sspw/pupil-services/school-nurse March 2022 Wisconsin Department of Public Instruction

The Department of Public Instruction does not discriminate on the basis of sex, race, color, religion, creed, age, national origin, ancestry, pregnancy, marital status or parental status, sexual orientation or disability.





Dates and Times:

APRIL 28, 2022 1:00PM-2:30PM

MAY 18, 2022 9:00AM-10:30AM

Register for one session

The Zoom link for your session will be sent with your registration confirmation.

#### **Session questions? Contact:**

Julie Incitti School Social Work Consultant, WI DPI julie.incitti@dpi.wi.gov (608) 266-0963

Min/Max # Participants: 15/100

#### **Registration Assistance:**

Mary Devine, CESA #4 (800) 514-3075; mdevine@cesa4.org





# (Online) Taking a Deeper Dive into Human Trafficking

#### WITH LIVED EXPERIENCE EXPERT NANCY YARBROUGH

PRESENTED IN PARTNERSHIP WITH THE WISCONSIN SAFE AND HEALTHY SCHOOLS (WISH) CENTER, THE WISCONSIN DEPARTMENT OF PUBLIC INSTRUCTION (DPI), THE DEPARTMENT OF CHILDREN AND FAMILIES (DCF) AND FRESH START LEARNING, INC.

In this workshop, school professionals will learn more about how victims get in and stay in human trafficking situations, as well as how survivors get out and stay out.

#### Participants will:

- be able to describe the common coercion process in trafficking
- · identify signs of dual identity within trafficking victims
- explore best practices for speaking to a survivor's true self
- practice a motivational communication skill: OARS.

Presenter Nancy Yarbrough is the Lived Experience Coach and Executive Director of Fresh Start Learning, Inc. Nancy is a captivating speaker who brings years of experience including through her work with young people currently involved in trafficking.

This session is recommended for pupil service staff, and any adult supporting youth with complex needs in schools.

The online sessions will not be recorded. Please join ready to engage and learn how to boost your skills as an advocate for youth.



#### Online Registration (FREE)

April 28, 2022 -- 1:00PM-2:30PM; ONLINE--ZOOM https://login.myquickreg.com/register/event/event.cfm?eventid=31410

May 18, 2022 -- 9:00AM-10:30AM; ONLINE--ZOOM <a href="https://login.myguickreg.com/register/event/event.cfm?eventid=31411">https://login.myguickreg.com/register/event/event.cfm?eventid=31411</a>

For more information on another session on this topic, scheduled for May 3, 2022, click here (Online) Anti-Human Trafficking |Wisconsin Department of Public Instruction (DPI) Video Facilitation Guide and Lessons - Training for School Staff and Other Professionals Supporting Anti-Trafficking

#### Please Return Screening Results to:



#### 731 North Jackson Street, Suite 405 Milwaukee, WI 53202 Fax # (414) 765-0377 Office: (414) 765-0505 E-mail: Shelby@pbwi.org

Children's Vision Screening Program Statistical Report - Total Number of Children Screened & Referred- April 1st-March 31st

| Agency / Employer:  | :              | Contact:        |  |  |  |  |
|---|----------------|-----------------|--|--|--|--|
| Address:  |                | Email:          | Email: Phone:  |  |  |  |
| City, State, Zip: School Districts Served: Grades Screened: |                | Phone:          |  |  |  |  |
|   |                | County:         | County:  Date of Screening:                          |  |  |  |
|   |                | Date of Screen  |  |  |  |  |
| Screening Tool (s)  |                |                 |  |  |  |  |
| Visual Acuity:  | Snellen/Sloan  | SureSight       | Assistance from a Lions/Lioness Club?                |  |  |  |
|   | VIP Wheel      | Spot Screener   | Club Name:   |  |  |  |
|   | Eye Check Book | Plusoptix       | *Please indicate which grades/how many they screened |  |  |  |
|   | HOTV           | Other Test:     | <del>_</del>   |  |  |  |
| Gr  | rade           | Number Screened | Number Referred                                      |  |  |  |
| Preschoo  | ol (3K, 4K)    |                 |  |  |  |  |
|   | arten (5K)     |                 |  |  |  |  |
| 1st (   | Grade          |                 |  |  |  |  |
| 2nd   | Grade          |                 |  |  |  |  |
| 3rd (   | Grade          |                 |  |  |  |  |
| 4th 0   | Grade          |                 |  |  |  |  |
| 5th   | Grade          |                 |  |  |  |  |
| 6th   | Grade          |                 |  |  |  |  |
| 7th   | Grade          |                 |  |  |  |  |
| 8th   | Grade          |                 |  |  |  |  |
| High Sch  | nool (9-12)    |                 |  |  |  |  |
| Unk   | known          |                 |  |  |  |  |
| TO  | TAL:           |                 |  |  |  |  |

#### Follow Up Results on Referred Children

Tabulate results from all children referred, whether or not an examiner's report was received.

#### RECORD ONLY ONE CONDITION PER CHILD

If Amblyopia or Strabismus are diagnosed in addition to a refractive error, record Amblyopia or Strabismus as the Dominant Diagnosis. [Example: Both Astigmatism and Amblyopia] Record ONLY Amblyopia. [Example: Strabismus and Hyperopia] Record ONLY Strabismus. If both Amblyopia AND Strabismus are diagnosed, record as Amblyopia.

Refractive errors (Myopia, Hyperopia, Astigmatism) should be recorded only when Amyplyopia or Strabismus have not been diagnosed.

More than anything, we want to know how many children are getting to care. If you have no information other than observing that they came back to school with glasses, please record this in the Other/Notes category.

| Grade       | Amblyopia | Strabismus | Myopia | Hyperopia | Astigmatism | Normal | No information Received | Other/Notes |
|-------------|-----------|------------|--------|-----------|-------------|--------|-------------------------|-------------|
| 3K & 4K     |           |            |        |           |             |        |                         |             |
|             |           |            |        |           |             |        |                         |             |
| 5K          |           |            |        |           |             |        |                         |             |
| 1           |           |            |        |           |             |        |                         |             |
| 2           |           |            |        |           |             |        |                         |             |
|             |           |            |        |           |             |        |                         |             |
| 3           |           |            |        |           |             |        |                         |             |
| 4           |           |            |        |           |             |        |                         |             |
| 5           |           |            |        |           |             |        |                         |             |
| 6           |           |            |        |           |             |        |                         |             |
| 7           |           |            |        |           |             |        |                         |             |
| 8           |           |            |        |           |             |        |                         |             |
|             |           |            |        |           |             |        |                         |             |
| High School |           |            |        |           |             |        |                         |             |
| Other       |           |            |        |           |             |        |                         |             |
| Unknown     |           |            |        |           |             |        |                         |             |
| Total       |           |            |        |           |             |        |                         |             |



#### **URGENT Medical Device Correction**

M5071A (adult) and M5072A (infant/child) pads for use with HS1/OnSite/Home AEDs may experience gel separation and reduction of gel surface area

04-FEB-2022

## This document contains important information for the continued safe and proper use of your equipment

Please review the following information with all members of your staff who need to be aware of the contents of this communication. It is important to understand the implications of this communication.

Please retain a copy with the equipment Instruction for Use.

Dear Customer,

A problem has been identified in the Philips M5071A (adult) and M5072A (infant/child) AED pads that could pose a risk for patients or users. This URGENT Correction is intended to inform you about:

#### 1. What the problem is and under what circumstances it can occur

HS1/OnSite/Home AED pads (PN: M5071A, M5072A) have been observed to experience gel separation from the foam/tin backing when peeled from the yellow plastic liner. The gel may fold onto itself resulting in reduced surface area of gel on the pad, or it may separate almost completely leaving only a small amount of gel on the pad. Any pad currently installed in or stored with an HS1/OnSite/Home AED could experience this problem, and it is not possible to know prior to patient use if your pad is affected because the pads are protected by a foil seal. Philips assesses that between 4% to 7% of unexpired pads could experience this problem.

#### 2. Describe the hazard/harm associated with the issue

When a pad with separated, folded gel is placed on the patient's bare skin, the HS1/OnSite/Home AED could deliver less effective therapy to the patient due to the reduced surface contact area with the skin. Separated, folded gel may also have a discolored and/or melted appearance. While the gel may also have a discolored and/or melted appearance, the appearance does not have any impact on the delivery of therapy; however, there may be a delay in therapy if the user hesitates to apply the pad due to its appearance. See example pictures in **Figures 1** and **2**.

It is also possible that the gel could separate almost completely from the foam/tin backing when peeled, (see **Figure 3**.) In this case, due to a small amount of gel surface contact area with the skin, the HS1/OnSite/Home may not be able to shock through the pads. A delay in therapy will result while the user installs a replacement pads cartridge (if available) or performs CPR while waiting for Emergency Medical Services Personnel to arrive. For comparison, **Figure 4** shows a normal pad.



**Figure 1**: Separated gel that has folded onto itself when peeled.

Action: Apply pads to the patient. Do not hesitate.



**Figure 2**: Separated, folded gel may also have a discolored and/or melted appearance.

Action:
Apply pads to the patient.
Do not hesitate.



**Figure 3**: Gel almost completely separated from backing.

Action:
Replace pads cartridge if a spare is
available. If no spare is available, perform
CPR until help arrives.



Figure 4: Normal pad.

Action:
Apply pads to the patient according to the Instructions for Use/Owner's Manual.



#### 3. Affected products and how to identify them

Affected products include all Adult and Infant/Child Pads Cartridges (PNs: M5071A and M5072A) installed in or stored as spares with the HS1, OnSite, and Home AEDs. This notice takes into consideration only pads that are unexpired.

The M5071A and M5072A part numbers are located on the pads cartridge and the foil packaging. The M5072A identifier can also be found on the box that Infant/Child pads are shipped in. See photos below with the location of the part number circled.



## 4. Describe the actions that should be taken by the customer / user in order to prevent risks for patients or users

Per the Instructions for Use/Owner's Manual, if a patient is unconscious and not breathing normally, customers should turn on the HS1/OnSite/Home AED and use it on the patient. In standby mode, customers should keep their HS1/OnSite/Home AED with pads installed according to the Instructions for Use/Owner's Manual. It is not possible to know if your pads are affected by the problem prior to use because the pads are protected by a foil seal. The foil seal on the pads cartridge should be opened only for patient use in an emergency because the pads will quickly dry out if the foil seal is broken.

As noted in the Instructions for Use/Owner's Manual, Philips recommends that you store a spare pads cartridge with your HS1/OnSite/Home AED.

During use, if you notice the gel beginning to separate from the foam backing, try to prevent the gel from folding onto itself if possible. Do not hesitate to apply the pads to the patient unless the gel has almost completely separated from the backing as in **Figure 3**. In case of trouble, install spare pads if available and continue the rescue.

As described in the Instructions for Use, you may hear voice prompts listed in the following table to assist you.

| HS1/OnSite/Home tells you:  | Possible cause                                    | Recommended action  |
|---|---|---|
| to insert a pads cartridge  | The pads cartridge has been damaged.              | Insert a new pads cartridge.                                      |
| to press pads firmly to<br>the skin<br>to make sure the pads<br>have been removed from<br>the liner | The pads are not properly applied to the patient. | Make sure the pads are sticking completely to the patient's skin. |



| the pads should not be touching the patient's clothing. |  |   |
|---|--|---|
| to insert new pads cartridge                            | The pads cartridge has been opened and the pads peeled off the liner, but the pads have not been successfully attached to the patient. There may be a problem with the pads cartridge. | Replace the damaged pads cartridge. Pull up the handle on the cartridge cover, and replace pads on patient with new pads to continue with the rescue. |

A short video showing how to replace the pads cartridge can be found at: <a href="https://www.philips.com/replace-aed-pads">www.philips.com/replace-aed-pads</a>

If the problem continues and you do not have a spare pads cartridge, attend to the patient, providing CPR if needed, until Emergency Medical Services Personnel arrive.

This notice needs to be passed on all those who need to be aware within your organization (if appropriate).

5. Describe the actions planned by the Philips Emergency Care and Resuscitation business to correct the problem

Philips is actively working on design changes intended to eliminate the issue in the M5071A and M5072A pads. Philips projects to release updated pads later in 2022, dependent upon design activities and subcomponent availability. Philips plans to notify eligible customers and supply updated pads.

If you need any further information or support concerning this issue, please contact your local Philips representative, or contact Philips at (800) 263-3342.

This notice has been reported to the appropriate Regulatory Agencies. Be sure to report any occurrence of this issue to Philips, your Philips representative, or to the FDA. Adverse reactions or quality problems experienced with the use of this product may be reported to the FDA's MedWatch Adverse Event Reporting program either online, or by regular mail, or by fax.

Philips regrets any inconvenience caused by this problem.

Sincerely,

Tanya DeSchmidt Director of Quality

**Emergency Care and Resuscitation** 

I William

**Customer Code** 

**PHILIPS** 

## URGENT MEDICAL DEVICE CORRECTION RESPONSE FORM

Reference: Gel Separation, M5071A and M5072A, 2021-CC-EC-012

**Instructions:** Please complete and return this form to Philips promptly and no later than 30 days from receipt. Completing this form confirms receipt of the Urgent Medical Device Correction Letter, understanding of the issue, and required actions to be taken.

| Customer/Consignee/Facility Name: Rockford Christia   | an School                      |   |  |  |  |
|---|--------------------------------|---|--|--|--|
| Street Address: 1401 N Bell School Rd   |                                |   |  |  |  |
| ROCKFORD City/State/ZIP/Country:  | IL                             | 61107-2872  |  |  |  |
| Customer Actions:   |                                |   |  |  |  |
| <ul> <li>Keep your HS1/OnSite/Home AED in service accornot possible to know if your pads are affected by protected by a foil seal. The foil seal on the pads obecause the pads will quickly dry out if the foil seal.</li> </ul>                                    | the problem<br>artridge sho    | n prior to use because the pads are<br>ould be opened only in an emergency          |  |  |  |
| Consider storing a spare pads cartridge with your   | HS1/OnSite                     | /Home AED.  |  |  |  |
| <ul> <li>If your HS1/OnSite/Home is kept with spare pads, view the short video showing how to replace the pads<br/>cartridge. <a href="https://www.philips.com/replace-aed-pads">www.philips.com/replace-aed-pads</a></li> </ul>                                    |                                |   |  |  |  |
| <ul> <li>During use, if you notice the gel beginning to sepa<br/>from folding onto itself if possible. Do not hesitate<br/>almost completely separated from the backing. In<br/>continue the rescue. Attend to the patient, provid<br/>Personnel arrive.</li> </ul> | e to apply the<br>case of trou | ne pads to the patient unless the gel has uble, install spare pads if available and |  |  |  |
| <ul> <li>Please pass this notice to all those who need to be aware within your organization or to any organization<br/>where pads cartridges have been transferred, (if appropriate.)</li> </ul>  |                                |   |  |  |  |
| I acknowledge receipt and understanding of the accomposition confirm that the information from this Letter has been pro   | panying Urg<br>operly passe    | gent Medical Device Correction Letter and ed to those who need to be aware.         |  |  |  |
| Name of person completing this form:  |                                |   |  |  |  |
| Signature:  | Date<br>(DD/MN                 | Л/ҮҮҮҮ):  |  |  |  |
| Printed Name:   | Telepho                        | ne Number:  |  |  |  |
| Title: Email Address:   |                                |   |  |  |  |

Please return this form to Philips by email or fax: <a href="mailto:ECR.Recall.Response@Philips.com">ECR.Recall.Response@Philips.com</a> (833) 371-1011

514069-2500-1441-PRI Kelly Rector 3000 Minuteman Rd Andover, Massachusetts 01810-1032

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#### **URGENT MEDICAL DEVICE CORRECTION**

8\*\*\*\*\*\*\*\*\*\*\*AUTO\*\*MIXED AADC 480

Rockford Christian School AED Owner 1401 N Bell School Rd Rockford, IL 61107-2872

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