

WISCONSIN DEPARTMENT OF PUBLIC INSTRUCTION

School Nurse UPDATE

#16 April 21, 2022

Greetings!

It is spring, though it certainly does not feel like it weatherwise in Wisconsin! Spring means planning for summer is in full swing. This year the **DPI School Nurse Summer Institute will resume in person.** Dates are being finalized. The topic will be pupil record keeping practices focusing on health records. Nursing Continuing Professional Development (NCPD) will be awarded.

Governor Evers signed 2021 Wisconsin Act 218 (copy attached to this newsletter) which expands current statutes related to epinephrine autoinjectors to include the ability to use "prefilled syringes" of epinephrine whenever the law would allow use of an epinephrine autoinjector. Thus, students may carry and self-administer emergency epinephrine via an auto injector or a prefilled syringe (Wisc. Stat. sec. 118.2925 [1] [h]). The emergency epinephrine prescribed in the name of a school that has adopted a plan may now be an auto-injector or a prefilled syringe (Wisc. Stat. sec. 118.2925 [3]). Every section of Wisc. Stat. sec. 118.29 that describes the administration of emergency epinephrine now relates to both auto-injectors and prefilled syringes of epinephrine.

Did your school district opt in to receive money from the "Get Kids Ahead Initiative?" Read about the initiative and find out how much money your district is receiving by reading the article in DPI News on page two.

See the flyers at the end of this Update for information about **DPI's Building** the Heart of Successful Schools conference to be held December 2022. The planning committee has announced the keynote speaker and is soliciting presentation proposals.

If you are seeking some new adventures this summer, **consider being a summer camp nurse.** See information from two organizations seeking applicants. DPI does not endorse such organizations, but I pass on the information as a topic of interest to readers of these Updates.

FEATURED STORIES

PRACTICE POINTS –
Disposing of Sharps and
Medication

Autism Acceptance Month (p. 2)

School Nurse Day Webinar (p. 3)

You-ology: A Puberty Guide for EVERY Body (p. 11)

SAVE THE DATE

Next DiSH-WI Session — May 18, 2022

School Nurse Network Meeting — May 17, 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

Louise

DPI supports best practices/evidence-based resources but does not vet or endorse products/services. User is responsible to evaluate the resource and how it meets local needs. Some pictures courtesy of Unsolash.

DPI News

April is Autism Acceptance Month

This month is a time to recognize the importance of building inclusive schools and workplaces with equal opportunities for all! There are many opportunities in Wisconsin to learn about autism, including DPI grant-funded resources as well as statewide family support and advocacy groups supporting people with neurodiverse needs. For more information and resources, visit the Wisconsin DPI Autism webpage and the Supporting Neurodiverse Students webpage, and the Community of Practice on Autism Spectrum Disorders and other Developmental Disabilities (CoP ASD/DD) YouTube channel for more information and resources.



Gov. Evers' "Get Kids Ahead Initiative" Awards \$15 Million to Help Nearly Every Wisconsin School District Provide School-Based Mental Health Support for Kids

Gov. Tony Evers announced nearly every school district across the state, including more than 450 local education agencies, will be awarded funds through the governor's \$15 million "Get Kids Ahead" initiative, as announced during his 2022 State of the State address. Schools will be able to use these funds to provide direct mental healthcare, hire and support mental health navigators, provide mental health first aid and trauma-based care training, or provide family assistance programs.

Every public school district in the state was eligible to opt in to receive these funds and was guaranteed to receive a minimum of \$10,000. The remainder of the funds were allocated on a per-pupil basis. A breakdown of funding by local education agency is available here.*

"This funding to support student mental health is already going out the door and making a difference in the lives of Wisconsin's children," said State Superintendent of Public Instruction Dr. Jill Underly. "I commend the governor for his leadership, and for ensuring that this funding was both flexible enough for schools to access it effectively and intentional enough that it is truly addressing students' needs."

Save the Date for Endless Possibilities Conference 2022

Endless Possibilities will hold a Virtual Conference on August 5, 2022, with the theme of Effective Family Engagement Honoring Diversity for Successful Partnerships. Lola Dada-Olley is the keynote speaker. You can view her TedTalk: Your Path is Your Future and we look forward to a full lineup of presentations and a day of professional learning. Please share with families, educators, and agencies to save this date. Early registration will open early May. More Information Coming Soon! Visit: Endless Possibilities 2022 Flyer or visit the WI FACETS Endless Possibilities webpage in May.

Every public school district in the state was eligible to opt in to receive these funds and was guaranteed to receive a minimum of \$10,000. The remainder of the funds were allocated on a perpupil basis.

DPI News

State Superintendent Dr. Jill Underly Op-Ed on Teaching About Race and Racism

State Superintendent Dr. Jill Underly published an op-ed on why teaching students about race and racism is essential. The message explains the meaning of critical race theory and goes into detail on the importance of teaching students about systemic racism.

Excerpt: "The question has been, "Are we teaching CRT in our K-12 classrooms?" and the honest answer is no, we are not teaching an academic theory that originated and belongs in university seminars. But if what you're actually asking is, "Are we teaching students about race and racism?" then the answer is and should be yes. To do anything else would be a blatant disregard for the truth of our country's history and an erasure of the lived experience of our students. Teaching about race and racism is the only way to teach the complete story of the United States."

The full op-ed for publication, <u>can be found here on the Wisconsin</u> Department of Public Instruction's website.

DPI Helping to Promote School Nurse Day Webinar

School nurses and others are invited to attend this webinar and provide photos. See flyers attached to this newsletter for more information.

A Day in the Life: A Photo Essay of the Wisconsin School Nurses and the COVID-19 Pandemic

Date: May 11th, 2022 Time: 3:00-4:00 pm Join Zoom Meeting

https://us02web.zoom.us/j/87328154034

Meeting ID: 873 2815 4034
Or, if you need to participate by phone, dial: +1 312 626 6799 US
(Chicago)
And use Meeting ID: 873 2815 4034



Teaching about race and racism is the only way to teach the complete story of the United States.



Wisconsin School Nurses, help us celebrate you!
Please email photos of yourself "in action"
during the 2020-21 & 2021-22 school years.

Email photos to Teresa@schoolhealthassociates.com by May 2nd
Include your name, credentials, and name of school/school district

DPI News

WI FACETS Upcoming May Webinars

For more information, please click on the register link where a full description of the training is provided.

Up to Me - How to Disclose May 9 | 12:00-12:30 pm

Part 4 of the Up to Me: Starting the Conversation Series on supporting families facing mental health challenges. Should someone decide to disclose their story or that of a loved one, this session addresses how to do so.

Presenters: Emily Jonesburg and Sharon Dossett, Rogers Community Learning and Engagement



Educational Services for Children Placed in Foster Care May 11 | 12:00-1:00pm

This workshop will address specific aspects of the special education process in regard to children and youth with IEPs in foster care. The intention is to raise awareness about some of the rights and responsibilities for caregivers and schools and to improve the ability of caregivers to understand the process more thoroughly.

Presenters: Julie Incitti, School Social Work Consultant, WI DPI and Eva Shaw, Education Consultant on the Special Education Team, WI DPI

REGISTER

Autism and Anxiety and my Journey into Adulthood May 18 | 6:00-7:00 pm

My journey is just that, my journey. We all have a journey. My journey involves being autistic, having anxiety, and becoming an adult. I hope I can help you on your journey or help you support others on their journeys.

Presenters: Hunter Markle, Self-advocate on autism and anxiety and Tim Markle, founder of The Forgiveness Factor

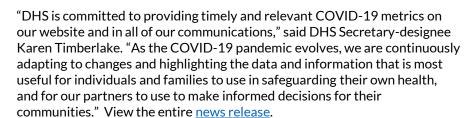


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DHS News

DHS Makes Changes to COVID-19 Data Webpages
Updates make data easier to find, align with CDC Community Levels as a tool to keep you safe and healthy

The Wisconsin Department of Health Services (DHS) made a number of changes and updates to the COVID-19 data visualizations available on its website, aligning pages with the latest scientific recommendations from the CDC, including the CDC Community Levels, and providing a more streamlined data experience for visitors to the DHS COVID-19 data webpages. DHS supports the CDC's recommendation to use COVID-19 Community Levels as a tool to assess the current risk of COVID-19 to determine necessary prevention measures in counties across the state.





Due to a lack of funding, the federal government's Health Resources and Services Administration recently announced that its COVID-19 Uninsured Program will no longer accept claims for reimbursement of costs associated with administering COVID-19 tests or vaccines to uninsured and underinsured individuals. DHS wants to assure Wisconsinites that you do not need insurance or an ID to get a COVID-19 vaccine.

Wisconsin vaccine providers must administer the COVID-19 vaccine regardless of your ability to pay COVID-19 vaccine administration fees or your insurance coverage status.

COVID-19 vaccines remain safe, free, and widely available. DHS recommends everyone 5 and older to receive a COVID-19 vaccine. It's a great time to get vaccinated!

Testing helps stop the spread of COVID-19 and protects individuals, families, and communities. The good news is that many free testing options are available. These include <u>ordering free at-home tests</u> from the federal government and getting tested at any <u>community testing site</u> in Wisconsin.

To find a COVID-19 vaccine provider in your community, visit <u>Vaccines.gov</u>, or dial 211 or 877-947-2211. For additional information about booster doses, additional doses, and help accessing your COVID-19 vaccine record to determine when you may be recommended for a booster, visit the <u>DHS</u> Additional Doses and Booster Doses webpage.



Wisconsin vaccine providers must administer the COVID-19 vaccine regardless of your ability to pay COVID-19 vaccine administration fees or your insurance coverage status.

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DHS News

Respiratory Report

The current Respiratory Virus Surveillance Report is located here.

Plan to Protect campaign re-launching soon

The Plan to Protect campaign, originally launched in 2020, will relaunch April–June 2022 across Wisconsin via social media, radio ads, streaming radio, and on TV. The purpose of the campaign is to reach parents-to-be and new parents with the message that vaccines are one of the best ways to protect their baby's health.

The three main goals are to:

- Get expecting parents started on their child's vaccine schedule on-time.
- Get new parents to catch-up on their child's vaccine schedule, if needed.
- Encourage parents to talk to their doctor or health care professional if they have questions.

The campaign will direct parents to visit the Immunization Program webpage for more information.

Materials for you to use on your website or social media can be found on the Immunization Program Partners webpage. Please feel free to disseminate the materials within your own organization and among your partners. Materials are currently available in English and Spanish. New materials, including materials in Hmong, are expected to be released in May and will be available for your use on the website above. We will send out a reminder email as materials become available.

Introducing the Department of Health Services' Safekeeping Campaign

"Safekeeping" means keeping your school or early childhood education center safe from environmental hazards.

While COVID-19 has tested us, it has also taught us. We learned a lot about what happens when sanitizers and disinfectants are misused or overused, when buildings are left vacant for months on end, and when indoor air quality, amidst a respiratory pandemic, is not well-maintained.

The Wisconsin Department of Health Services (DHS) Safekeeping campaign seeks to provide tips and resources to schools and early childhood education centers on maintaining environmentally safe and healthy facilities for children and staff. Here is the new Safekeeping campaign website.



The purpose of the campaign is to reach parents-to-be and new parents with the message that vaccines are one of the best ways to protect their baby's health.

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DHS News

New Pneumococcal Vaccines for Adults

During 2021, the Food and Drug Administration approved two new pneumococcal vaccines for use among adults. Recently, PCV15 and PCV20 were added to the <u>2022 Recommended Adult Immunization Schedule</u> and the Advisory Committee on Immunization Practices (ACIP) has published <u>updated recommendations</u> for use of these vaccines among adults. In general, they are recommended for:

- Adults aged 65 years and older who have not previously received PCV or whose previous vaccination history is unknown should receive one dose of PCV (either PCV20 or PCV15).
 When PCV15 is used, it should be followed by a dose of PPSV23.
- When PCV15 is used, the recommended interval between administration of PCV15 and PPSV23 is one year or more. A minimum interval of eight weeks can be considered for adults with an immunocompromising condition, cochlear implant, or cerebrospinal fluid leak to minimize the risk for invasive pneumococcal disease caused by serotypes unique to PPSV23 in these vulnerable groups.
- Adults aged 19–64 years with certain underlying medical conditions or other risk factors who
 have not previously received PCV or whose previous vaccination history is unknown should
 receive one dose of PCV (either PCV20 or PCV15). When PCV15 is used, it should be
 followed by a dose of PPSV23.

Adults Who Previously Received Pneumococcal Vaccine

- Adults who have only received PPSV23 may receive a PCV (either PCV20 or PCV15) one year
 or more after their last PPSV23 dose. When PCV15 is used in those with history of PPSV23
 receipt, it need not be followed by another dose of PPSV23.
- Adults who have previously received PCV13 should complete the recommended pneumococcal schedule; however, one dose of PCV20 may be used if PPSV23 is not available.
- Adults who have previously received PCV13 and PPSV23 should continue to follow the recommended pneumococcal schedule.

PCV15, PCV20, and updated PPSV23 and PCV13 vaccine sections of the Immunization Policy and Procedure Manual are available on Sharepoint (PCA Portal). We anticipate that PCV15 and PCV20 will be available for local health departments to order in WIR during April 2022. The WIR pneumococcal schedule and forecasting are currently being updated. Until the schedule and forecasting have been updated in WIR, please refer to the ACIP schedule and recommendations for pneumococcal vaccination among adults.

As part of the transition, PCV 13 is no longer available to order for administration among adults. PCV13 vaccines ordered for use in adults prior to April 1, 2022, may be used to vaccinate children who are eligible for state-supplied vaccine (for example, children who are VFC-eligible).

MMWR

Effectiveness of COVID-19 mRNA Vaccination in Preventing COVID-19-Associated Hospitalization Among Adults with Previous SARS-CoV-2 Infection — United States, June 2021–February 2022

Summary

What is already known about this topic?

Persons with previous SARS-CoV-2 infection have some protection against reinfection leading to hospitalization, but there is limited evidence regarding the additional benefit of vaccination among these persons.

What is added by this report?

Among persons with previous infection, COVID-19 mRNA vaccination provided protection against subsequent COVID-19-associated hospitalization. Estimated vaccine effectiveness against reinfection leading to hospitalization during the Omicron-predominant period was approximately 35 percent after dose 2, and 68 percent after a booster dose.

What are the implications for public health practice?

To prevent COVID-19-associated hospitalization, all eligible persons should stay up to date with vaccination, including those with previous SARS-CoV-2 infection. Link to report.

Notes from the Field: SARS-CoV-2 Omicron Variant Infection in 10 Persons Within 90 Days of Previous SARS-CoV-2 Delta Variant Infection — Four States, October 2021–January 2022

The findings from this case series might not be generalizable to the U.S. population and are specific to the transition period between Delta and Omicron variant predominance. Nonetheless, this study highlights potential limits of infection-induced immunity against novel variants. Read study.

Secondary Attack Rate, Transmission and Incubation Periods, and Serial Interval of SARS-CoV-2 Omicron Variant, Spain

In this study, vaccinated Omicron index case-patients seemed to have the same transmission capacity as nonvaccinated persons. We did not find this increased transmission capacity for the Delta variant, where significant differences in SAR were observed in global, household, and occupational settings (Table 1) within groups. Read study.



Among persons with previous infection, COVID-19 mRNA vaccination provided protection against subsequent COVID-19-associated hospitalization.

NASN News

Save the Date and Spread the Word! National School Nurse Day 2022 Wednesday, May 11

Note arrangements are in the works for both Governor Evers and DPI State Superintendent Dr. Underly to write proclamations for School Nurse Day.

Bring attention to #SND2022 to honor the more than 95,000 school nurses in the United States who are the leaders bridging healthcare and education! We've made it easy for you to share #SND2022 with your social networks. Visit schoolnurseday.org to find the logo, social media toolkit, and more!



April is Stress Awareness Month

Stress affects all systems of the body. Our bodies are equipped to handle stress in small amounts. When stress becomes chronic, it can have serious effects. NASN continues to be interested in reaching out every other month to the Healthy School Nurse community with suggested strategies to support the energy and resiliency of school nurses. Check out this month's latest blog, Journaling - Putting Pen on Paper, a simple yet powerful tool that promotes wellness. Don't miss discussions all month long in The Healthy School Nurse Community in SchoolNurseNet.

Bring attention to #SND2022 to honor more than 95,000 school nurses in the United States who make a difference in the lives of children every day.

Miscellaneous

Summer Camp Nurse Positions

- The Steve and Shari Sadek Family Camp Interlaken JCC in Eagle River, Wisconsin seek camp nurses. See flyer at end of this Update for a job description and contact information.
- WhizResources has current <u>camp openings</u> available. Rick Whisenhunt states the best way for an interested nurse to start is to complete the application at <u>WhizResources.com | Medical Staff Application</u> and staff will call them for a short phone interview. Rick Whisenhunt/ WhizResources/ 214-709-5559/www.whizresources.com

Children's Safety Network

April is Distracted Driving Awareness Month

In the United States, nine people die every day in crashes involving a distracted driver. In 2019:

- 4,356 people were killed in crashes involving a young driver (15-20 years old).
- Young drivers were involved in a <u>higher percentage of fatal</u> <u>crashes</u> than any other age group, <u>with 11 percent</u> of drivers reported as distracted.
- A survey found that <u>almost 4 in 10 high school students</u> reported diving distracted in the last 30 days.
- Distracted student drivers were <u>more likely</u> to report they did not always wear a seatbelt, rode with a driver or drove themselves after drinking alcohol.

Young driver crashes are preventable. Learn more about increasing young driver safety, as well as the safety of all road users in the CSN resources below:

- Teen Driving Safety: 2022 Resource Guide
- Webinar: Teen Driving Safety: Recent Research and Implications for Prevention
- <u>Child Safety Data for Unintentional Motor Vehicle Traffic</u>
 <u>Fatalities</u>
- <u>Teen Driver Safety Change Package and Outcome Measures</u>
 <u>Worksheet</u>



In the United States, nine people die every day in crashes involving a distracted driver.

HealthyChildren.Org

Helping Teens With Autism Transition to Adulthood: Tips for Parents & Caregivers

In honor of Autism Acceptance Month, we are featuring a new article developed to help parents of teens with autism transition into adulthood. Author Dr. Kristin Sohl advises parents that planning can make the difference between a successful transition or a stressful situation for both the teenager on the autism spectrum and their caregiver. She offers tips on when to start taking steps to ease into the process. Read the full article in English and Spanish.



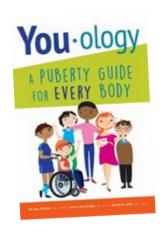
What if learning about changing bodies wasn't secretive or shameful? And what if it could even be inclusive, fun, and, well, kind of adorable? A new kind of puberty guide, You-ology: A Puberty Guide for EVERY Body embraces an inclusive approach that normalizes puberty for all kids. Traditional puberty education only contributes to a sense of isolation and often does not include all kids' experience of puberty. For curious kids and parents looking to talk about puberty in an inclusive way, You-ology offers fact-based, age appropriate, and body-positive information about the physical, social, and emotional changes ahead for all kids. Visit shop.aap.org to learn about available bulk discounts.

Lessons from the Field - Supporting Transgender & Nonbinary Students in K-12 Schools

This event was recorded and posted to the event page: https://safesupportivelearning.ed.gov/events/webinar/lessonsfield-supporting-transgender-nonbinary-students-k-12-schools







A new kind of puberty guide, You-ology: A

Puberty Guide for

EVERY Body embraces an inclusive approach that normalizes puberty for all kids. Traditional puberty education only contributes to a sense of isolation and often does not include all kids' experience of puberty.

PRACTICE POINTS

By Louise Wilson

Disposing of Sharps and Medications

School nurses often advise school administrators on the implementation of bloodborne pathogen protocols. The proper and safe disposal of used and unused sharps is an aspect of these protocols. Speaking of disposal, I often receive questions about the safe disposal of medications. So, for this issue I thought I would provide a few "practice points" on the safe disposal of sharps and medication.



Wisconsin's medical waste disposal regulations are managed by the Wisconsin Department of Natural Resources (DNR). Wisconsin law (Chapter NR 526) requires everyone to dispose of sharps separately from other waste. It is illegal to put sharps in the trash or with recyclables. This minimizes injuries and enables the recovery of valuable materials. When sharps are found in recyclables, whole loads of recyclables must be landfilled instead. The DNR has several resources to help households and non-medical facilities understand how to dispose of sharps and other infectious waste. Schools would follow these guidelines as most do not produce 50 pounds of infectious waste every year. To help reduce the risk of injury, follow these steps to get medical sharps ready for safe disposal:

- Place the sharps in rigid puncture-resistant containers with secure lids or caps. Acceptable containers include commercially available sharps containers or thick-walled plastic detergent or bleach bottles with screw caps. Unacceptable containers include coffee cans (the lids are too easily punctured), plastic milk jugs, plastic bags, aluminum cans and soda bottles. NOTE: DO NOT add bleach to the container. Bleach may not completely disinfect needles, and it could spill and injure you or waste handlers.
- Clearly label the sharps container with the words "bio-hazard", "infection waste" or "sharps." It is also acceptable to label detergent or bleach bottles with the words "Do Not Recycle" so it is not accidentally included with recyclables. You can also <u>print this label</u> created by the Outagamie County Health Department and tape it to your collection container.



It is illegal to put sharps in the trash or with recyclables. . The DNR has several resources to help households and nonmedical facilities understand how to dispose of sharps and other infectious waste.

- When the container is almost full, take it to a registered sharps disposal site. Access the DNR website for locations. Many healthcare facilities also accept sharps but are not required to register with the DNR. Ask your healthcare provider, clinic, or local hospital if you can bring sharps to their location for disposal. Sharps mail-back programs are available online. The company may provide containers and packaging that meet U.S. postal regulations. Charges may apply.
 - For large quantities (50 pounds or more), hire a <u>licensed</u> infectious waste hauler [PDF].
 - For small quantities up to 50 pounds, you may transport the sharps to an infectious waste treatment facility yourself. If you do transport sharps, use a proper container and put the container in the trunk or another enclosed part of your vehicle.



Unused or Expired Medicine

The Department of Public Instruction (DPI) has created a document on the disposal of medications. It is located at this link and is found on the Medication Administration Resources webpage. If possible, give medications back to the students/families if the medication has become expired or is no longer being given at school. This is also a preferred practice for the end of the school year. Call the parent and ask if they would like to pick up the medication at the school or have you mail it home. This reduces the cost to the school for disposal and makes it more likely that the medication would be used instead of discarded. A school does not have to notify the Drug Enforcement Administration or the U.S. Postal Service of such mailings. DPI does not recommend that schools give any controlled substances to the students to take home due to the danger of drug diversion and other safety concerns. Other drugs may be sent home with the students according to your local policy and parent agreement.

When returning the medication is not possible, then the school must assume responsibility to manage the pharmaceutical waste. Because schools are institutions, they must follow state laws for businesses and institutions for managing the waste. These laws are outlined on the DNR's website. Go to http://dnr.wi.gov/topic/HealthWaste/, scroll down and choose "Non-households, pharmaceutical waste."

According to the U. S. Food & Drug Administration (FDA) the best way to dispose of most types of unused or expired medicines (both prescription and over the counter) is to drop off the medicine at a drug take back site, location, or program immediately once they are expired or the medication is no longer needed. This helps prevent accidental poisoning of children or pets, harm if taken by someone the medication is not prescribed for, or improperly diverted. This information is helpful to share with families who may seek advice on how to dispose of the medication the school has sent home.

If possible, give medications back to the students/families if the medication has become expired or is no longer being given at school. This is also a preferred practice for the end of the school year.

The FDA provides information for households regarding next steps to take if they cannot use a drug take back location. This information includes how to determine which medications may be flushed down a toilet. The Wisconsin Department of Natural Resources (DNR) continues to recommend that drugs should not be poured down sinks or flushed down toilets.

According to the DNR, after a school has determined that a particular medication cannot be returned, is not a controlled substance or infectious waste, and is not a hazardous waste, then the school district employees should dispose of the medication. The medications can be covered (hidden from view) in waste; and may be crushed, suspended in water, and added to kitty litter or unused coffee grounds; or the school may discard the waste through incineration at a licensed incinerator with their hazardous waste drugs.

Here are some helpful websites if you want more information;

WI DNR HOW TO SAFELY DISPOSE OF HOUSEHOLD PHARMACEUTICAL WASTE

WI DNR MANAGING HOUSEHOLD MEDICAL SHARPS
SafeNeedleDisposal.org

https://www.outagamie.org/home/showdocument?id=58224

FDA Disposal of Unused Medicines: What You Should Know

FDA Drug Disposal: Drug Take Back Locations

The Wisconsin

Department of

Natural Resources

(DNR) continues to

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poured down sinks or

flushed down toilets.

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 April 2022 Wisconsin Department of Public Instruction

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State of Misconsin



2021 Assembly Bill 337

Date of enactment: Date of publication*:

2021 WISCONSIN ACT

AN ACT *to renumber and amend* 255.07 (2); *to amend* 118.29 (2) (a) 2m., 118.292 (title), 118.292 (1r) (intro.) and (a) and (2) (a) and (b), 118.2925 (title), 118.2925 (1) (a), 118.2925 (1) (h), 118.2925 (3), 118.2925 (4) (title), (a), (b) and (c), 118.2925 (4m) (a) and (b), 118.2925 (5), 255.07 (title) and (1) (a), 255.07 (3), 255.07 (4), 255.07 (5) (a) 2. and 3., 255.07 (6) (a) (intro.), 1., 2. and 3., (b), (d), (e) and (f), 448.03 (2) (q) and 450.11 (4) (a) 5. d.; and *to create* 118.292 (1g) (bm), 118.2925 (1) (fm), 255.07 (1) (e) and 255.07 (2) (b) of the statutes; **relating to:** use of epinephrine prefilled syringes and standing orders for epinephrine.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

SECTION 1g. 118.29 (2) (a) 2m. of the statutes is amended to read:

118.29 (2) (a) 2m. Except for epinephrine administered under subd. 2., may use an epinephrine auto—injector or prefilled syringe, as defined in s. 118.292 (1g) (bm), to administer epinephrine to any pupil who appears to be experiencing a severe allergic reaction if, as soon as practicable, the school bus operator, employee or volunteer reports the allergic reaction by dialing the telephone number "911" or, in an area in which the telephone number "911" is not available, the telephone number for an emergency medical service provider.

SECTION 1m. 118.292 (title) of the statutes is amended to read:

118.292 (title) Possession and use of epinephrine auto-injectors.

SECTION 2. 118.292 (1g) (bm) of the statutes is created to read:

118.292 (**1g**) (bm) "Prefilled syringe" means a device that is approved by the federal food and drug administration, that contains a dose of epinephrine, and

that is used for the manual injection of epinephrine into the human body to prevent or treat a life—threatening allergic reaction.

SECTION 3. 118.292 (1r) (intro.) and (a) and (2) (a) and (b) of the statutes are amended to read:

118.292 (**1r**) (intro.) While in school, at a school–sponsored activity or under the supervision of a school authority, a pupil may possess and use an epinephrine auto–injector <u>or prefilled syringe</u> if all of the following are true:

- (a) The pupil uses the epinephrine auto-injector <u>or</u> <u>prefilled syringe</u> to prevent the onset or alleviate the symptoms of an emergency situation.
- (2) (a) A pupil as a result of using an epinephrine auto-injector or prefilled syringe under sub. (1r).
- (b) Any person as a result of a pupil possessing or using an epinephrine auto-injector or prefilled syringe under sub. (1r).

SECTION 4. 118.2925 (title) of the statutes is amended to read:

118.2925 (title) Life-threatening allergies in schools; use of epinephrine auto-injectors.

^{*} Section 991.11, WISCONSIN STATUTES: Effective date of acts. "Every act and every portion of an act enacted by the legislature over the governor's partial veto which does not expressly prescribe the time when it takes effect shall take effect on the day after its date of publication."

SECTION 5. 118.2925 (1) (a) of the statutes is amended to read:

118.2925 **(1)** (a) "Administer" means the direct application of an epinephrine auto-injector <u>or prefilled svringe</u> to a person's body.

SECTION 6. 118.2925 (1) (fm) of the statutes is created to read:

118.2925 (1) (fm) "Prefilled syringe" means a device that is approved by the federal food and drug administration, that contains a dose of epinephrine, and that is used for the manual injection of epinephrine into the human body to prevent or treat a life—threatening allergic reaction.

SECTION 7. 118.2925 (1) (h) of the statutes is amended to read:

118.2925 (1) (h) "Self-administer" means to administer an epinephrine auto-injector or prefilled syringe to one's own body.

SECTION 8. 118.2925 (3) of the statutes is amended to read:

118.2925 (3) PRESCRIPTIONS FOR SCHOOLS. A physician, an advanced practice nurse prescriber, or a physician assistant may prescribe epinephrine auto—injectors or prefilled syringes in the name of a school that has adopted a plan under sub. (2) (a), to be maintained by the school for use under sub. (4).

SECTION 9. 118.2925 (4) (title), (a), (b) and (c) of the statutes are amended to read:

118.2925 (4) (title) Use of Epinephrine Auto-Injectors.

- (a) Provide an epinephrine auto-injector or prefilled syringe to a pupil to self-administer the epinephrine auto-injector or prefilled syringe in accordance with a prescription specific to the pupil that is on file with the school.
- (b) Administer an epinephrine auto—injector <u>or pre-filled syringe</u> to a pupil in accordance with a prescription specific to the pupil that is on file with the school.
- (c) Administer an epinephrine auto-injector or prefilled syringe to a pupil or other person who the school nurse or designated school personnel in good faith believes is experiencing anaphylaxis in accordance with a standing protocol from a physician, an advanced practice nurse prescriber, or a physician assistant, regardless of whether the pupil or other person has a prescription for an epinephrine auto-injector or prefilled syringe. If the pupil or other person does not have a prescription for an epinephrine auto-injector or prefilled syringe, or the person who administers the epinephrine auto-injector or prefilled syringe does not know whether the pupil or other person has a prescription for an epinephrine autoinjector or prefilled syringe, the person who administers the epinephrine auto-injector or prefilled syringe shall, as soon as practicable, report the administration by dialing the telephone number "911" or, in an area in which the

telephone number "911" is not available, the telephone number for an emergency medical service provider.

SECTION 10. 118.2925 (4m) (a) and (b) of the statutes are amended to read:

118.2925 (**4m**) (a) The authority to self–administer an epinephrine auto–injector <u>or prefilled syringe</u> under sub. (4) (a) is independent of the authorized possession and use of an epinephrine auto–injector <u>or prefilled syringe</u> under s. 118.292 (1r).

(b) The authority to administer an epinephrine auto-injector or prefilled syringe under sub. (4) (b) and (c) is independent of the authority to administer an epinephrine auto-injector under s. 118.29 (2) (a) 2. and 2m.

SECTION 11. 118.2925 (5) of the statutes is amended to read:

118.2925 (5) IMMUNITY FROM CIVIL LIABILITY; EXEMP-TION FROM PRACTICE OF MEDICINE. A school and its designated school personnel, and a physician, advanced practice nurse prescriber, or physician assistant who provides a prescription or standing protocol for school epinephrine auto-injectors or prefilled syringes, are not liable for any injury that results from the administration or selfadministration of an epinephrine auto-injector or prefilled syringe under this section, regardless of whether authorization was given by the pupil's parent or guardian or by the pupil's physician, physician assistant, or advanced practice nurse prescriber, unless the injury is the result of an act or omission that constitutes gross negligence or willful or wanton misconduct. The immunity from liability provided under this subsection is in addition to and not in lieu of that provided under s. 895.48.

SECTION 12. 255.07 (title) and (1) (a) of the statutes are amended to read:

255.07 (title) Life-saving allergy medication; use of epinephrine auto-injectors.

(1) (a) "Administer" means the direct application of an epinephrine auto-injector <u>or prefilled syringe</u> to the body of an individual.

SECTION 13. 255.07 (1) (e) of the statutes is created to read:

255.07 (1) (e) "Prefilled syringe" means a device that is approved by the federal food and drug administration, that contains a dose of epinephrine, and that is used for the manual injection of epinephrine into the human body to prevent or treat a life—threatening allergic reaction.

SECTION 14. 255.07 (2) of the statutes is renumbered 255.07 (2) (a) and amended to read:

255.07 (2) (a) A health care practitioner may prescribe an epinephrine auto-injector or prefilled syringe in the name of an authorized entity or an authorized individual for use in accordance with this section. A health care practitioner may issue to one or more persons a standing order authorizing the dispensing of epinephrine auto-injectors or prefilled syringes for use under sub. (4) by an authorized individual or by an employee or agent

of an authorized entity who has completed the training required by sub. (5).

SECTION 15. 255.07 (2) (b) of the statutes is created to read:

255.07 (2) (b) A health care provider with prescribing authority who is employed by or under contract with the department may issue a statewide standing order for the dispensing of epinephrine auto-injectors or prefilled syringes for use under sub. (4) by authorized individuals or by employees or agents of authorized entities who have completed the training required by sub. (5).

SECTION 16. 255.07 (3) of the statutes is amended to read:

255.07 (3) AUTHORIZED ENTITIES OR INDIVIDUALS PERMITTED TO MAINTAIN SUPPLY. An authorized entity or an authorized individual may acquire and maintain a supply of epinephrine auto—injectors and prefilled syringes pursuant to a prescription issued in accordance with this section. The authorized entity or authorized individual shall store an epinephrine auto—injector or prefilled syringe in a location readily accessible in an emergency and in accordance with the epinephrine auto—injector's or prefilled syringe's instructions for use. An authorized entity shall designate an employee or agent who has completed the training required in sub. (5) to be responsible for the storage, maintenance, control, and general oversight of epinephrine auto—injectors or prefilled syringes acquired by the authorized entity.

SECTION 17. 255.07 (4) of the statutes is amended to read:

- 255.07 **(4)** Use of EPINEPHRINE AUTO—INJECTORS. An employee or agent of an authorized entity who has completed the training required by sub. (5) or an authorized individual may use an epinephrine auto—injector or prefilled syringe prescribed under sub. (2) to do any of the following:
- (a) Provide one or more epinephrine auto—injectors or prefilled syringes to any individual who the employee, agent, or authorized individual believes in good faith is experiencing anaphylaxis, or to the parent, guardian, or caregiver of that individual for immediate administration, regardless of whether the individual has a prescription for an epinephrine auto—injector or prefilled syringe or has previously been diagnosed with an allergy.
- (b) Administer an epinephrine auto-injector or prefilled syringe to any individual who the employee, agent, or authorized individual believes in good faith is experiencing anaphylaxis, regardless of whether the individual has a prescription for an epinephrine auto-injector or prefilled syringe or has previously been diagnosed with an allergy.

SECTION 18. 255.07 (5) (a) 2. and 3. of the statutes are amended to read:

- 255.07 (5) (a) 2. Standards and procedures for the storage and administration of an epinephrine auto-injector and, if applicable, a prefilled syringe.
- 3. Emergency follow-up procedures after an epinephrine auto-injector <u>or prefilled syringe</u> is administered, including the necessity of calling the telephone number "911" or another telephone number for an emergency medical service provider.

SECTION 19. 255.07 (6) (a) (intro.), 1., 2. and 3., (b), (d), (e) and (f) of the statutes are amended to read:

- 255.07 **(6)** (a) (intro.) All of the following are not liable for any injury that results from the administration or failure to administer an epinephrine auto-injector or prefilled syringe under this section, unless the injury is the result of an act or omission that constitutes gross negligence or willful or wanton misconduct:
- 1. An authorized entity or authorized individual that possesses and makes available an epinephrine auto-injector or prefilled syringe and employees, agents, and authorized individuals that store, maintain, control, oversee, provide, or use an epinephrine auto-injector or prefilled syringe.
- 2. A health care practitioner who prescribes or dispenses an epinephrine auto-injector or prefilled syringe to an authorized entity or authorized individual.
- 3. A pharmacist or other person who dispenses an epinephrine auto-injector <u>or prefilled syringe</u> to an authorized entity or authorized individual.
- (b) The use of an epinephrine auto-injector <u>or pre-filled syringe</u> under this section does not constitute the practice of medicine or of any other health care profession that requires a credential to practice.
- (d) A person is not liable for any injuries or related damages that result from providing or administering an epinephrine auto—injector <u>or prefilled syringe</u> outside of this state if the person satisfies any of the following criteria:
- 1. The person would not have been liable for injuries or damages if the epinephrine auto-injector <u>or prefilled syringe</u> was provided or administered in this state.
- 2. The person is not liable for injuries or damages under the law of the state in which the epinephrine auto-injector or prefilled syringe was provided or administered.
- (e) Nothing in this section creates or imposes any duty, obligation, or basis for liability on any authorized entity, or employees, agents, or authorized individuals, to acquire or make available an epinephrine auto-injector or prefilled syringe.
- (f) Nothing in this section creates or imposes any duty, obligation, or basis for liability on any employer or any other person to supervise or exercise control over an individual's provision or administration of an epinephrine auto-injector or prefilled syringe, if the employer or

other person reasonably believes the individual is acting as an authorized individual under this section.

SECTION 20. 448.03 (2) (q) of the statutes is amended to read:

448.03 (2) (q) The administration of an epinephrine auto-injector <u>or prefilled syringe</u> in accordance with s. 118.2925 or 255.07.

SECTION 21. 450.11 (4) (a) 5. d. of the statutes is amended to read:

450.11 (4) (a) 5. d. For an epinephrine auto-injector or prefilled syringe prescribed under s. 118.2925 (3) or 255.07 (2), the name of the school, authorized entity, authorized individual, or other person specified under s. 255.07 (3).

Building the Heart of Successful Schools 2022 Keynote Announcement + Call for Proposals



December 8, 2022

Glacier Conference Center | Wilderness Resort | Wisconsin Dells, WI Pre-conferences December 7



Keynote Speaker Mike Veny

Mental health speaker and best-selling author Mike Veny will share how he went from struggling with mental health challenges to being a thought leader that travels the globe telling his story to help transform stigma.

Mike is an engaging and energetic presenter with a fresh perspective on diversity and inclusion. Mike will present an opening and closing keynote session at this year's BHSS Conference: *Transforming Stigma in the Classroom* and *How to Find Inner Peace in Times of Uncertainty*.

Learn more about Mike Veny on his website: mikeveny.com

Conference registration coming soon!

Sign up for the WISH Center Newsletter for updates

The Building the Heart of Successful Schools (BHSS) Conference connects and inspires Wisconsin educators. The heart of the conference is the school experiences shared. Please consider presenting your effective practices at our program sharing conference. We're looking for all levels of experiences - initial implementation through sustainable continuous improvement.

Now accepting pre-conference and sectional proposals!

Due May 15, 2022

Click <u>here</u> to submit your proposal.

Building the Heart of Successful Schools 2022 Conference Sectional and Preconference Proposal Form



December 8, 2022

Glacier Conference Center | Wilderness Resort | Wisconsin Dells, WI Pre-conferences December 7

The Building the Heart of Successful Schools (BHSS) Conference connects and inspires Wisconsin educators. The heart of the conference is the school experiences shared. Please consider presenting your effective practices at our program sharing conference. We're looking for all levels of experiences - initial implementation through sustainable continuous improvement.

The DPI and the Wisconsin Safe & Healthy Schools Center are inviting Wisconsin schools and school districts, colleges, community-based organizations, and other partners to submit proposals to present pre-conference or sectional sessions at the BHSS Conference at the Wilderness Resort in Wisconsin Dells. Pre-conference sessions will be held on Wednesday, December 7 and conference sessions will be held on December 8, 2022.

Topics typically addressed at the conference support comprehensive school based mental health systems and include:

- Preventing ATOD (Alcohol, Tobacco, and Other Drugs)
- Mental Health
- Creating a Positive School Climate
- Health, School Safety and Violence Prevention, Trauma Sensitive Schools, Social Emotional Learning, etc.

The 300-500 attendees of this conference include school counselors, school social workers, health teachers, AODA Coordinators, and principals, among others.

Proposal Considerations:

- Conference sectionals are 60 minutes in length.
- Pre-conference sessions are half or full day in length.
- Presentation methods should be interactive. Consider using group exercises, demonstration, discussion, or case study.
- Presentations that represent a diversity of methods, materials, and audience are encouraged.
- Select sessions will be recorded for participant viewing at a later date. (sessions will not be livestreamed).
- The conference fee for presenters will be waived.
- Presenters are responsible for travel, lodging expenses, and pre-conference registration (*if applicable*).

Proposals are due May 15, 2022.

Proposals will be evaluated by the conference planning committee.

The lead presenter contact will be notified of proposal acceptance by June 1, 2022.

Click here to submit your proposal.



Help us celebrate Wisconsin School Nurses on School Nurse Day!

We invite you to attend:

<u>A Day in the Life: A Photo Essay of the</u> Wisconsin School Nurses and the COVID-19 Pandemic

Date: May 11th, 2022 **Time:** 3:00-4:00 pm

Join Zoom Meeting https://us02web.zoom.us/j/87328154034

Meeting ID: 873 2815 4034
Or, if you need to participate by phone, dial: +1 312 626 6799 US (Chicago)

And use Meeting ID: 873 2815 4034

Join us as we celebrate a group of healthcare professionals who have worked tirelessly and unceremoniously for the past two years to keep hundreds of thousands of Wisconsinites healthy and ready to learn. We invite you "behind the scenes" into the health rooms of eleven Wisconsin schools. Through words and photographs, this webinar will shine a light on the remarkable and often invisible work of school nurses and provide the public with a better understanding of the physical and emotional toll the pandemic has had on school nurses.

To learn more about *A Day in the Life: A Photo Essay of the Wisconsin School Nurses and the COVID-19 Pandemic* project, visit: https://www.wischoolnurses.org/a-day-in-the-life

This project is funded in part by a grant from <u>Wisconsin Humanities</u>, with funds from the National Endowment for the Humanities and the State of Wisconsin. Any views, findings, conclusions or recommendations expressed in this project do not necessarily represent those of the National Endowment for the Humanities.



Camp Nurse

Summary Description:

Under the supervision of the camp director, camp nurses work in as part of a team of 3-5 nurses and a rotating physician to run Camp's Health Center and take care of medical needs of both campers and staff. This position is residential, and nurses commit to a time frame of either June 7th – August 23rd, June 7th-July 18th, or July 21-August 16th. A Camp Interlaken JCC nursing position involves responsibility, diligence, compassion, patience, and good work ethic. Campers and staff look to nurses as trusted professionals during their time at camp. Camp allows campers to develop their skills and build self-esteem within a safe, fun, and caring environment, which camp nurses are an essential part of.

Since 1966, The Steve and Shari Sadek Family Camp Interlaken JCC have provided a haven for children and staff in the magnificent Eagle River, Wisconsin, North woods. Camp fosters enduring relationships and love of community while promoting individual growth, learning, and fun.

Responsibilities Include:

- I. Medication and Supplies
 - A. Distribute and oversee daily prescription medications to campers.
 - B. Provide over the counter medications to campers and staff as per protocol. .
 - C. Keep Health Center supply closet, Med Shed, and First Aid Kits organized, cleaned and stocked.
 - D. Notify the Camp Director/or appropriate designee and medical director of any supply needs in a timely manner.

II. Care

- A. Triage small injuries (cuts, scrapes, bee stings etc.) for campers and staff as they arise.
- B. Help physicians treat campers and staff during twice daily Sick Call hours. Throughout the day see ill campers and triage as necessary.
- C. Monitor and provide care for any campers and staff who may need to stay in the Health Center for extended periods or overnight.
- D. Communicate frequently and thoroughly with the medical director, physician, nurses, and other camp staff to ensure best care.
- E. Communicate care with campers' families as detailed in the Health Center Manual.
- F. Maintaining accurate records of all health related consultations, nursing actions and referrals.

III. COVID-19

- A. Aid in the implementation of Camp's testing and quarantine procedures.
- B. Support the Camp Director in any changes or further measures needed to prevent and/or manage COVID-19 at camp.
- IV. Any other duties as assigned in the Health Center Manual.

Qualifications | The ideal candidate is/has...

- Nursing license and current CPR, AED, and First Aid certifications.
- The ability to work with, communicate with, relate to children of all ages.
- Committed to being a positive role model for children.
- The ability to accept guidance and support and ask for help.
- Comfortable working with others who have different work styles.
- An enthusiastic nature and the ability to adapt.