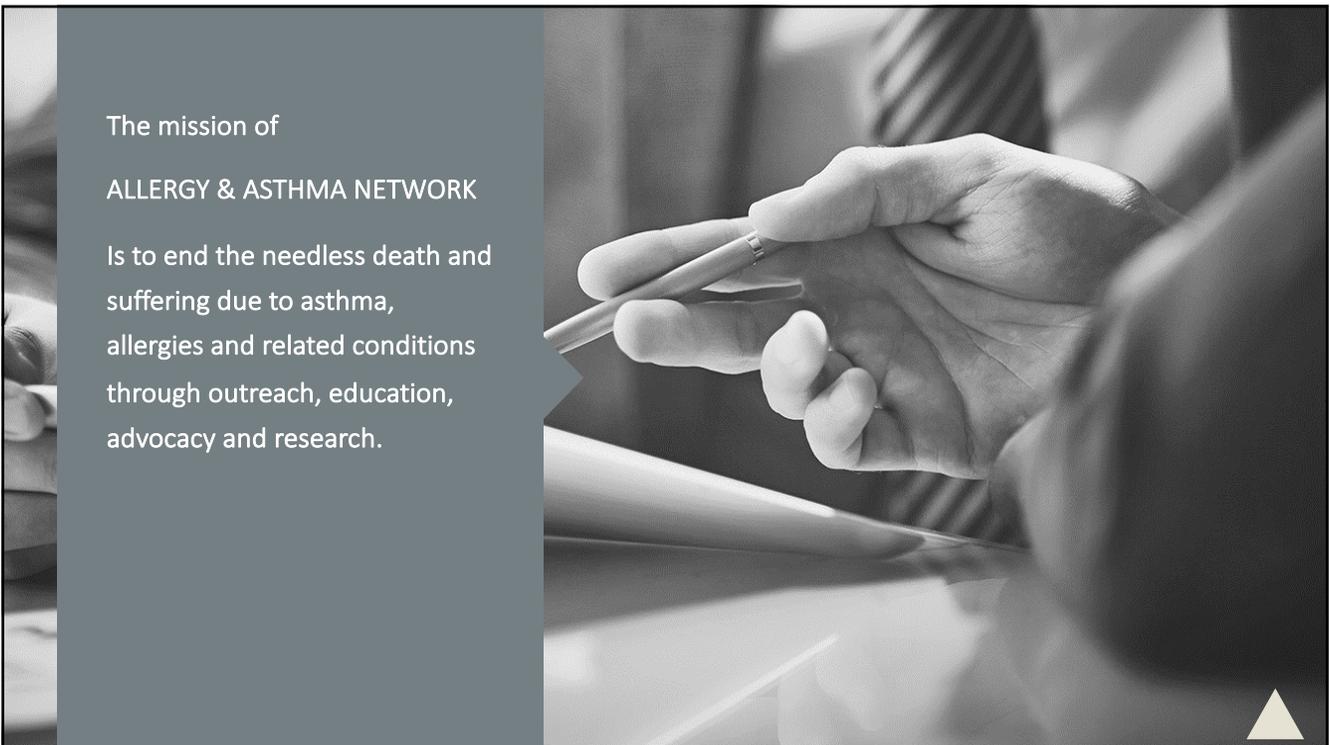




1



2

Meet Our Speakers



Susan Hoffmann, MSN, RN, NCSN
School Nurse Consultant

Former School Nurse,
Nursing Education Project Manager, National Association
of School Nurses



Sally Schoessler, MEd, BSN, RN, AE-C
Director of Education - Allergy & Asthma Network

Former School Nurse, State School Nurse Consultant,
Director of Nursing Education, National Association of
School Nurses

3

Today's Program

- 01 Introduction to Caring for Students with Chronic Health Conditions
- 02 SN CHAT: Basic Intake Interviews and Information
- 03 SN CHAT: Student Healthcare Plans & Plan Development



4

How Did SN CHAT Come to Be?

Marjorie Cole

Missouri State School Nurse Consultant



In Missouri, many of our schools have greater than 25% of the students with a chronic health condition. School Nurses are challenged with assuring that all children with a chronic health condition are assessed at the beginning of the school to determine their unique health care needs and then determining which student might need an emergency action plan developed for staff as well as those in need of an individualized health care plan.

"A team of Missouri school nurses worked with Sue Hoffman to develop and then pilot the first School Nurse Chronic Health Assessment Tool. (SN- CHAT). This tool helped to guide our conversations with parents. It offered a time for us engage in a positive way with our parents and certainly helped us demonstrate our interest in their child and his/her unique needs.

SN CHAT, has increased the number of students with an emergency action plan in place at the beginning of the school year and has increased parent engagement. Students are safer, parents feel heard."

5



Introduction to Caring for Students with Chronic Health Conditions

6



>25%



Over 25% of students enrolled in kindergarten through grade 12 schools have a chronic health condition. These students are at risk for having a life-threatening emergency for which school staff must be prepared to intervene.

7

The School Nurse . . .

Uses assessment skills & critical nursing judgement

Prioritizes which students are at highest risk for an emergency

Coordinates the student's care in partnership with the parent/guardian, student, healthcare team and school staff

Develops emergency plans and trains school staff to follow



Assessment Skills



Highest Risk



Coordination of Care



Emergency Plans

8



STANDARD OF PRACTICE

American Nursing Association (ANA)

National Association of School Nurses (NASN)



- established that planning is a standard of school nursing practice (ANA, 2017). It is essential for school nurses to develop plans for school staff to follow so that students are healthy, safe and ready to learn. .



9

Planning is a Vital Part of the Nursing Process



10

SN CHAT: Basic Intake Interviews and Information

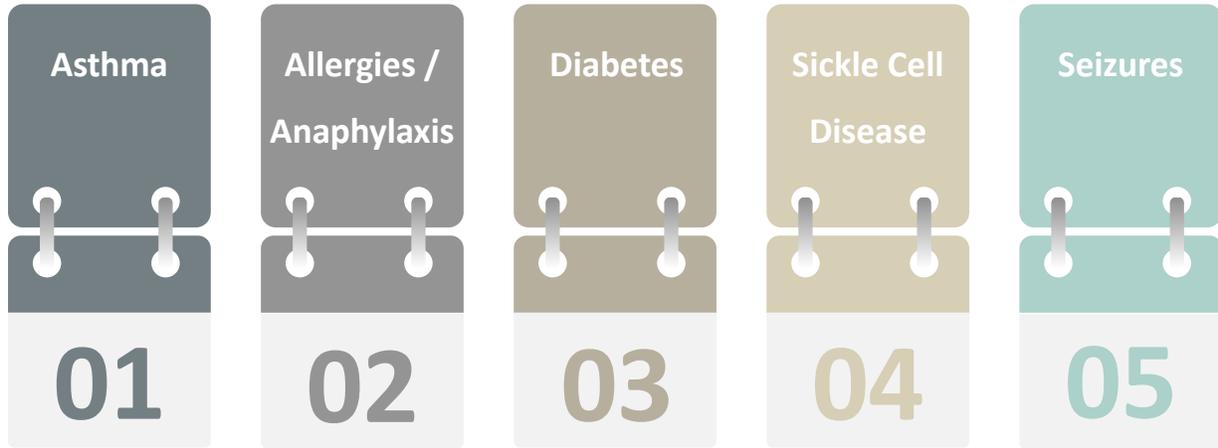
11



Always placing the student at the center of care, SN CHAT® allows the school nurse to coordinate care between the medical home, parent and family as well as school staff.

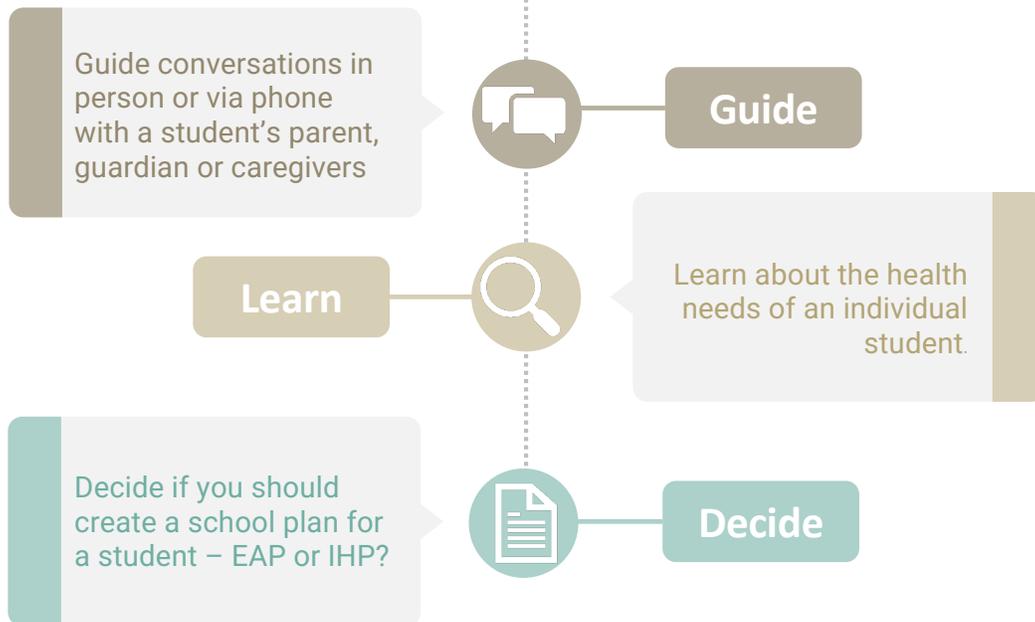
12

Common Chronic Health Conditions highlighted in SN CHAT



13

The School Nurse can use SN CHAT® to:



14

It's important to gather subjective information as well as objective data

- Initiate conversation with parent or caregiver
- Obtain a full Health History
- Build a trusting relationship

Basic Intake Interview

Parent or Caregiver of a Student with a Chronic Health Condition

Confirm Diagnosis

Our records show that [use student name] has a health concern. Is that correct?

Co-morbidities

Does your student have any other health concerns?



Quick Health History

- When did you find out your student had this health condition?
- How does it impact the student's daily life?
- Does your child need any assistive devices such as glasses or hearing devices?
- [Add questions for specific health issue as needed]
- What challenges do you face in dealing with this health condition?
- Do you currently have health insurance coverage for your child?
- Is the coverage adequate to pay for your child's medicines, supplies and needed healthcare provider's visits?
- How does your child do with managing the health condition?
- How often do you see a Healthcare Provider? When was the last time?
- Have you had to seek emergency care? When was the last time?
- Does your student take medicine at home? What? How often?

How Can I Help?

- Do you feel that your student needs special arrangements at school?
- Does the student receive medical treatments such as catheterizations or tube feedings?
- Can I arrange a meeting with your student's teacher/counselor?
- Do you feel that your student is mistreated in any way?
- May I call your doctor with questions?

How You Can Help the School Take Care of Your Student

- Provide a Healthcare Provider's diagnosis (note from HCP)
- Provide needed medication & forms
- Call with any changes in your student's condition
- Call with any concerns

SN CHAT
School Nurse Chronic Health Assessment Tool

15

Intake Interview Questions

Additional Questions for Specific Chronic Health Conditions

Following the questions from the Basic Intake Interview, the school nurse may require more information specific to the student's health condition. The school nurse should choose the most appropriate questions from the suggestions below.

Specific questions for 5 common health conditions:

- Asthma
- Allergies
- Diabetes
- Sickle Cell Disease
- Seizures

Asthma Example:

- Do you know what makes (insert student's name)'s asthma worse? How do you know that (student's name) asthma is getting worse? Peak flow monitoring? Symptoms?
- Has (insert student's name) ever had a life-threatening asthma flare?
- What triggers an asthma flare?
 - Animal dander, pollen, cold air, smoke, mold, or activity?
- Does (insert student's name) cough at night? How many nights a week?
- Does asthma interfere with any activities, such as running or singing? List activities:
 - How many times per week?
- During the last month, on average, how many days did (insert student's name) have any asthma symptoms, such as coughing, wheezing, shortness of breath, or waking up at night?

16

Tips for Interviewing

Conducting a Parent/Guardian Interview

Before the interview

- Review school registration forms to identify students with chronic conditions
- Pre-fill demographic data
- Review school health records for medical orders or emergency plans
- Determine parent/guardian's preferred language
- Arrange for translator as needed

During the interview

- Avoid education, medical and/or nursing terminology and acronyms
- Ask for clarification when needed
- Avoid judgemental responses
- Allow adequate time for parent/guardian to respond
- Ask open ended questions when possible

Establish relationship with parent/guardian

- Ask if this is a good time to discuss. If not, schedule another time to talk.
- Explain how the information will be used and shared.
- Assure confidentiality with exception of need to know

Use parent friendly language

- Determine parent/guardian language and arrange for translation as needed
- Avoid education, medical and/or nursing terminology and acronyms

After the interview

- Thank the parent/guardian for their time and participation
- Follow up with school staff if more information is needed
- Communicate with medical care providers with parent permission

SN CHAT
School Nurse Chronic Health Assessment Tool

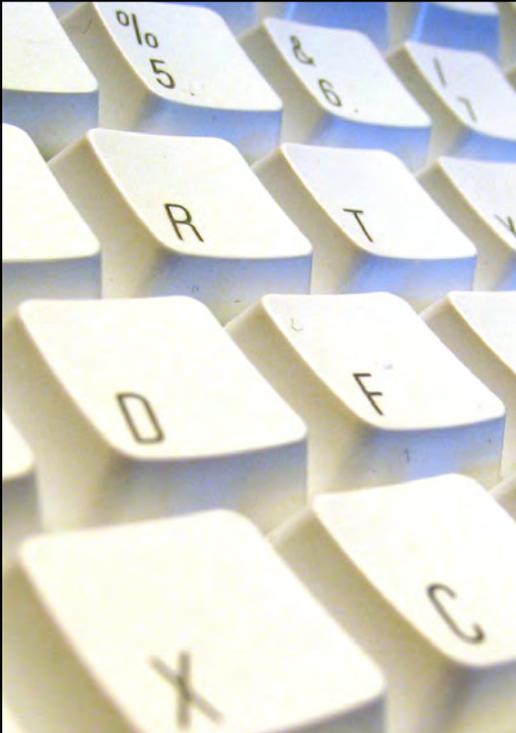
Interview Tips

Build bridges

Try not to say “No”

Try not to use medical terminology

17



SN CHAT: Student Healthcare Plans & Plan Development

18

School Health Related Plans



Individualized Healthcare Plan (IHP)

Written in nursing language to guide nursing care

Emergency Care/Action Plan (ECP or EAP)

Written in lay language for school staff to follow to direct emergency care



Section 504 Plan

For students with a health condition that impacts functioning at school

Individualized Education Plan (IEP)

Created by Committee on Special Education – usually not used for health issues unless a learning disability also exists



19

Student Care Plans

Criteria for Development of Student Specific Plan – EAP or IHP

IT IS IMPORTANT THAT THE SCHOOL NURSE USE NURSING JUDGMENT
WHEN DETERMINING WHO NEEDS AN EMERGENCY ACTION PLAN.

*The criteria listed below are for guidance, but it is the responsibility of the school nurse
to make the final clinical determination on which students need an EAP.*



20

Emergency Action Plan (EAP)

An Emergency Action Plan is written for students with known health conditions that are likely to result in a medical emergency.

The EAP is written in lay language for staff and non-medical personnel to follow.

Components of an EAP

- Student name / demographic data
- Short, relevant medical history
- Outline of symptoms and emergency treatment (for all school settings)

Students with the conditions below may benefit from an EAP:

Asthma

- Previous asthma emergency, hospitalizations
- Poor asthma control

Allergies

- History of life-threatening allergy
- Has epinephrine prescribed for emergency use

Diabetes

- Previous diabetic emergency, hospitalizations
- Has insulin prescribed for regular use

Sickle Cell Disease

- History of vaso-occlusive crisis

Seizures

- History of status epilepticus
- Has medication prescribed for emergency use

Individualized Healthcare Plan (IHP)

An Individualized Healthcare Plan is written for students with a known health condition that requires more complex care at school. Needs may include education, medications and treatments and/or social/emotional care. The IHP is written in nursing language to guide care provided by the registered professional nurse.

Components of an IHP

- Student name / demographic data
- Short, relevant medical history
- Outline of nursing care to be administered or supervised

Students with the conditions below may benefit from an IHP:

Asthma

- Detail care, equipment needed
- Medication administration
- Education plan – prevention and management

Allergies

- Detail prevention strategies, exposure avoidance
- Emergency medications and care
- Education plan – prevention and management

Diabetes

- Equipment, medication and treatment needs
- Emergency medications and care
- Education plan – daily and emergency care

Sickle Cell Disease

- Health maintenance strategies outlined
- Education plan – decrease pain events, understand interventions

Seizures

- Detail care – daily care, medications
- Education plan – prevention and management



SN CHAT
School Nurse Chronic Health Assessment Tool

21

Individualized Healthcare Plans

Development of Student Specific Plan

Individualized Healthcare Plan or IHP

- An Individualized Healthcare Plan is written for students with known health conditions that are more complex with treatment and educational needs.
- Individualized Healthcare Plans are a standard of school nursing practice.

When the registered professional school nurse has determined that the student would benefit from the development of an Individualized Healthcare Plan (IHP):



Assessment

- Collect subjective & objective data
- Analyze data - includes physiological, psychological, sociocultural, spiritual, economic and life-style factors (social determinants of health)



Nursing Diagnosis

- Clinical judgment about individual, family or community experiences/responses to actual or potential health problems/life processes.
- Provides the basis for selection of outcomes & interventions



Goal

- What the student/family wants to achieve - collaborative process
- Short & long term goals - measurable behaviors to show progress
- SMART Goals



Outcomes

- A measurable, expected, realistic and attainable expectation for the student
- Identified by nurse - culturally appropriate, student centered care



Interventions

- Specific evidence based steps to reach the desired outcomes, care coordination
- Includes documentation of treatments, equipment, emergent care, education & coping



Evaluation

- 3 categories: Outcome, Process & Impact
- Use data to document if goals are met
- Done continually - formal evaluation annually

SN CHAT
School Nurse Chronic Health Assessment Tool

IHPs are written:

- By a registered nurse
- In nursing language to be used by nurses
- Based on the nursing process

22

EAPs (or ECPs) are written:

- By a school health professional
- In lay language to be used by school staff
- Outlines steps to take in the event of an emergency

Emergency Action Plans

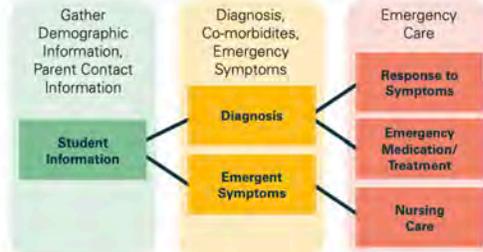
Development of Student Specific Plan



Emergency Action Plan or EAP

An Emergency Action Plan is written for students with known health conditions that are likely to result in a medical emergency.

When the registered professional school nurse has determined that the student would benefit from the development of an Emergency Action Plan (EAP):



Notes:

- The EAP is written in lay language that all school staff can understand.
- Keep the EAP simple to avoid confusion in an already stressful situation.
- Review the EAP with staff, provide training, check for understanding and document who was trained.
- Stress that a student experiencing a potential health emergency should NEVER be left alone – should never yell to the Health Office unattended.
- Include student picture in the event that a substitute nurse or teacher responds to the emergency.
- Ask parent for their preferred hospital, explain that in some acute situations, a closer hospital may be chosen.
- Always have a staff member accompany a student in an ambulance if the parent is not present!
- The EAP should be kept where it is accessible to the teacher and substitute staff but kept confidential.
- Suggestion: Place in red "Health Information Folder" and place in top right hand desk drawer in each classroom.

SN CHAT
School Nurse Chronic Health Assessment Tool

EAP Templates

Asthma	Anaphylaxis	Diabetes	Sickle Cell	Seizures
Asthma Action Plan Green, Red, Yellow zones	Anaphylaxis Plan Symptoms & action	Diabetes Plan Episodes & care	Sickle Cell Plan Pain crisis & treatment	Seizure Plan Triggers & first aid

Asthma Action Plan for Home & School

Name: _____ Birthdate: _____

Asthma Severity: Intermittent Mild Persistent Moderate Persistent Severe Persistent
 He/She has had many or severe asthma attacks/exacerbations

Green Zone Have the child take these medicines every day, even when the child feels well.

Always use a spacer with inhalers as directed.

Controller Medication(s): _____

Controller Medication(s) Given at School: _____

Rescue Medication: Albuterol/levosalbutamol _____ puffs every 4-6 hours as needed

Exercise Medication: Albuterol/levosalbutamol _____ puffs 15 minutes before activity as needed

Yellow Zone Begin the sick treatment plan if the child has a cough, wheeze, shortness of breath, or tight chest. Have the child take all of these medicines when sick.

Rescue Medication: Albuterol/levosalbutamol _____ puffs every 4 hours as needed

Controller Medication(s): _____

Continue Green Zone medicines

Add: _____

Change: _____

If the child is in the yellow zone more than 24 hours or is getting worse, follow red zone and call the doctor right away!

Red Zone If breathing is hard and fast, ribs sucking out, unable walking, talking, or sleeping.

Get Help Now

Take rescue medication(s) now

Rescue Medication: Albuterol/levosalbutamol _____ puffs every _____

Take: _____

If the child is not better right away, call 911
 Please call the doctor any time the child is in the red zone.

Asthma Triggers: [List] _____

School Staff: Follow the Yellow and Red Zone plans for rescue medicines according to asthma symptoms. (Do not administer unless the only option is to be administered at school or those listed as "given at school" in the green zone.)
 Both the school provider and the parent feel that the child may carry and self-administer their albuterol.
 School nurse agrees with student self-administering the inhaler.

Asthma Provider Printed Name and Contact Information: _____ Asthma Provider Signature: _____
 Date: _____

Parent/Guardian: I give written authorization for the medication listed in the action plan to be administered in school by the nurse or other school members as appropriate. I consent to communication between the prescribing health care provider/clinic, the school nurse, the school medical advisor, and school-based health clinic, as necessary for asthma management and administration of this medication.

Parent/Guardian Signature: _____ School Nurse Reviewed: _____
 Date: _____ Date: _____

Please print a signed copy back to the provider listed above.

Asthma Action Plan

SAMPRO – School Based
Asthma Management Program

Green Zone
Yellow Zone
Red Zone

25

Anaphylaxis
Action Plan

EMERGENCY ACTION PLAN

Anaphylaxis – Life-Threatening Allergies

Student Name: _____ DOB: _____ Grade: _____

Identified Allergen(s): _____

Asthma: Yes No Other relevant health concerns: _____

Contact Information:

Parent/Guardian Name: _____ Phone: _____

Parent/Guardian Name: _____ Phone: _____

Emergency Contact: _____ Phone: _____

Additional Contacts: _____ Phone: _____

Building Health Office/School Nurse: _____ Phone: _____

IMPORTANT: EACH ALLERGIC REACTION MAY INCREASE IN SEVERITY FROM PREVIOUS REACTIONS. ALLERGIC REACTIONS CAN INCREASE IN SEVERITY QUICKLY – PROVIDE EMERGENCY CARE AS QUICKLY AS POSSIBLE.

A LIFE-THREATENING ALLERGIC REACTION MAY INCLUDE ANY OR ALL OF THESE SYMPTOMS:

<p>Are any of these signs and symptoms present and severe?</p> <ul style="list-style-type: none"> ✓ LUNG: Short of breath, wheeze, repetitive cough ✓ HEART: Pale, blue, faint, weak pulse, dizzy, confused ✓ THROAT: Tight, hoarse, trouble breathing/swallowing ✓ MOUTH: Obstructive swelling (tongue and/or lips) ✓ SKIN: Hives over body 	<p>Or is there a combination of symptoms from different body areas?</p> <ul style="list-style-type: none"> ✓ SKIN: Hives, itchy rashes, swelling (lips) ✓ GUT: Nausea, cramping pain, diarrhea ✓ RESPIRATORY: Runny nose, sneezing, swollen eyes, phlegmy throat ✓ OTHER: Confusion, agitation, feeling of impending doom
--	--

DO THIS

Initiate care – do not delay treatment if anaphylaxis is suspected. When in doubt, give epinephrine.

TREATMENT: Epinephrine – Medication is at school. Yes No. Dosage: _____

Directions for administration: _____ Repeat dose after 5 or more minutes if needed.

Treatment should be initiated immediately following exposure without waiting for symptoms (per healthcare provider)

Treatment should be initiated only following the appearance of symptoms (per healthcare provider)

THEN MONITOR

PROVIDE ONGOING CARE: Stay with the student, maintain airway, do not have the student rise to an upright position. Observe for changes.

If epinephrine is given, 911 should be called immediately and the student should be transported to the nearest emergency room. Preferred hospital: _____

Doctor's Name: _____ Date: _____

Emergency Plan written by: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

The parent/guardian signature authorizes the nurse to share this information with school staff on a "need to know" basis. In the event of an emergency, care will be initiated and parents will be contacted. This plan is in effect for the current school year only.

SN CHAT
 School Nurse Chronic Health Management Tool

26

Diabetes
Emergency
Plan

EMERGENCY ACTION PLAN

Hypoglycemia – Diabetes

Student Name: _____ DOB: _____ Grade: _____

Contact Information:

Parent/Guardian Name: _____ Phone: _____
 Parent/Guardian Name: _____ Phone: _____
 Emergency Contact: _____ Phone: _____
 Additional Contacts: _____ Phone: _____

Student Picture: _____

Building Health Office/School Nurse: _____ Phone: _____

AN EPISODE OF HYPOLYCEMIA MAY INCLUDE ANY OR ALL OF THESE SYMPTOMS:

Are any of these signs and symptoms present and severe?

- Shaking
- Fast heartbeat
- Sweating
- Anxiety, irritability

Onset may be sudden and can progress to a life threatening low blood sugar. If untreated seizures and even death can occur.

Indicates care - do not delay treatment.

TREATMENT: Stop any activity. Do not leave the student alone. Accompany the student to the Health Office for treatment, if possible, (blood glucose & monitoring). Access assistance from the school nurse, if possible.

Proceed with the following care per healthcare provider's instructions:

- Give snack: 1/2 to 1/4 cup juice, 3 - 4 glucose tabs, or hard candy
- Give glucose gel for emergency care
- Give glucagon if unresponsive, unable to swallow or unable to follow directions - After glucagon is given, call 911

Glucagon should be given without delay if student is unconscious or experiencing a seizure

Location of student's glucagon: _____ Route (injection or intranasal) _____

Site on body for glucagon if given by injection: _____

Staff member(s) trained by school nurse to administer glucagon to this student: _____

Call parents as soon as possible. Have a staff member accompany the student to medical care if needed - do not leave the student unattended. If on a field trip, notify the school nurse at:

If glucagon is given, 911 should be called immediately and the student should be transported to the nearest emergency room. Preferred hospital: _____

Doctor's Name: _____ Date: _____
 Emergency Plan written by: _____ Date: _____
 Parent/Guardian Signature: _____ Date: _____

The parent/guardian signature authorizes the nurse to share this information with school staff on a "need to know" basis. In the event of an emergency, care will be initiated and parents will be contacted.

This plan is in effect for the current school year only.

SN CHAT
 School Nurse Chronic Health Assessment Tool

27

EMERGENCY ACTION PLAN

Sickle Cell Disease - Pain (Vaso-occlusive) crisis

Student Name: _____ DOB: _____ Grade: _____

Contact Information:

Parent/Guardian Name: _____ Phone: _____
 Parent/Guardian Name: _____ Phone: _____
 Emergency Contact: _____ Phone: _____
 Additional Contacts: _____ Phone: _____

Student Picture: _____

Building Health Office/School Nurse: _____ Phone: _____

A pain crisis is when the blood vessels get blocked by sickled red blood cells and the tissues don't get the oxygen they need. This causes a pain crisis that can come on suddenly or build up over a few days. A PAIN CRISIS MAY INCLUDE ANY OR ALL OF THESE SYMPTOMS:

Are any of these signs and symptoms present?

Medical Emergency - Contact the School Nurse

- Pain or discomfort
- Headache (severe)
- Chest pain
- Bone/joint/hip pain
- Upper left, abdominal pain
- Priapism (sustained, unwanted erection)
- Vomiting
- Swelling of hands or feet

- Fever 101 degrees or higher
- Weakness or fatigue
- Weakness on either side of body
- Inability to speak
- Difficulty with memory
- Sudden or constant dizziness
- Blurred vision
- Changes in breathing, Difficulty breathing, fast rate, or harsh noisy breathing
- Noticeable change in the color of the skin, lips, fingernails

TREATMENT: Indicate care - do not delay treatment. Stop any activity. Accompany the student to the Health Office for treatment, if possible. Access assistance from the school nurse, if possible. **Never apply ice.**

TREATMENT: For medical emergencies, if the school nurse is unavailable 911 should be called immediately and the student should be transported to the nearest emergency room

Preferred hospital: _____
 Doctor's Name: _____
 Phone: _____

Proceed with the following care per healthcare provider's instructions:

- Medication: _____
- Hydrate: _____
- Other: _____

Emergency Plan written by: _____ Date: _____
 Parent/Guardian Signature: _____ Date: _____

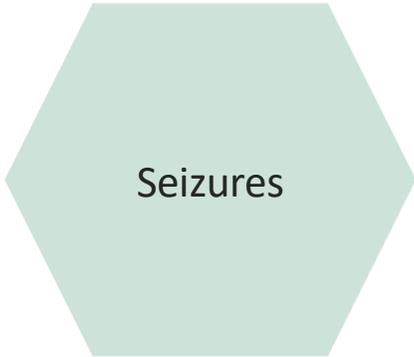
The parent/guardian signature authorizes the nurse to share this information with school staff on a "need to know" basis. In the event of an emergency, care will be initiated and parents will be contacted.

This plan is in effect for the current school year only.

SN CHAT
 School Nurse Chronic Health Assessment Tool

Sickle Cell
Disease
Emergency
Plan

28



EMERGENCY ACTION PLAN
Seizures

Student Name: _____ DOB: _____ Grade: _____

Contact Information:

Student Picture: _____ Phone: _____
 Parent/Guardian Name: _____ Phone: _____
 Parent/Guardian Name: _____ Phone: _____
 Emergency Contact: _____ Phone: _____
 Additional Contacts: _____ Phone: _____

Building Health Office/School Nurse: _____ Phone: _____

Seizure Type	Triggers	How Long It Lasts	How Often	What Happens

First Aid - STAY calm, begin timing seizure. Notify school nurse.

- ✓ Provide PRIVACY – remove other students from area
- ✓ Keep the student SAFE – remove harmful objects, don't restrain, protect head
- ✓ Position on SIDE – turn on side if not awake, keep airway clear, don't put objects in mouth

Give Medication or Treatment

- ✓ Administer Medication _____ Instructions _____
- ✓ Swipe magnet for VNS (Vagal Nerve Stimulator) Instructions _____

Get Help

- ✓ Lasts more than 5 minutes
- ✓ Repeated seizures longer than 10 minutes with no recovery time in between
- ✓ Seizure does not stop after giving emergency medication
- ✓ Difficulty breathing after seizure ends
- ✓ Serious injury occurs or suspected or seizure in water

After the Seizure

- ✓ STAY with the student until fully recovered from seizure.
- ✓ Notify parent or guardian if student does not return to usual behavior (i.e., confused, or lethargic)

Emergency Plan written by: _____ Date: _____
 Parent/Guardian Signature: _____ Date: _____

The parent/guardian signature authorizes the nurse to share this information with school staff on a "need to know" basis in the event of an emergency, care will be initiated and parents will be contacted. This plan is in effect for the current school year only.

SN CHAT
School Nurse Chronic Health Assessment Tool

29

Customizable
Emergency
Plan

EMERGENCY ACTION PLAN
Health Condition _____

Student Name: _____ DOB: _____ Grade: _____

Contact Information:

Student Picture: _____ Phone: _____
 Parent/Guardian Name: _____ Phone: _____
 Parent/Guardian Name: _____ Phone: _____
 Emergency Contact: _____ Phone: _____
 Additional Contacts: _____ Phone: _____

Building Health Office/School Nurse: _____ Phone: _____

AN EMERGENCY MAY INCLUDE ANY OR ALL OF THESE SYMPTOMS:

If you see this:	DO THIS:

Preferred hospital: _____
 Doctor's Name: _____ Date: _____
 Emergency Plan written by: _____ Date: _____
 Parent/Guardian Signature: _____ Date: _____

The parent/guardian signature authorizes the nurse to share this information with school staff on a "need to know" basis in the event of an emergency, care will be initiated and parents will be contacted. This plan is in effect for the current school year only.

SN CHAT
School Nurse Chronic Health Assessment Tool

30

Additional Optional Questions

These questions can be used to help identify the social factors of health to better understand the child's health needs. In addition to talking to the parent/guardian, the school nurse can get information from school counselors, teachers, or academic records to complete this section.

Identify Individual Factors

- How is (insert student's name) doing in school? For example, their grades, their interest in learning, and relationships with classmates. _____
- Does (insert student's name) like school?
- Is there a current or past 504 Accommodations Plan or IEP? Are curriculum modifications needed?
- Are allowances provided for making up missed schoolwork due to illness episodes?
- Is support available to avoid outdoor activity in specific conditions, e.g., very cold, or hot or humid air conditions? (Wii, Arnold, Zaiger, 2017)

Identify Social and Family Factors

- Who does your child live with? List household members: _____
- Outside of your household members, who does your family get support from? This could be friends or family who don't live with you, including neighbors, religious leaders, members of faith-based organization or volunteer organizations.
- What is your child's first language? List language: _____. What language does your family mostly speak at home? List language: _____
- Does your child eat breakfast at home _____ or school _____? What about lunch? Does he/she eat school lunch or pack a lunch from home? School ____ Home ____ Does your child complain about this? Are there any problems during mealtimes?
- Is the student living with someone who abuses drugs or alcohol?
- Is the student living with someone with a mental or emotional illness?
- Are there other factors to consider such as Cultural or religious beliefs, practices, and needs: List: _____

Identify Emotional Factors

- Are there any observed or expressed anxiety or depression or suicidal thoughts?
- Are there any emotional/behavioral problems including anger, depression, anxiety, acting out, refusal, or school refusal?
- Is your child sensitive about discussing or sharing diagnosis/treatment?
- Does your child tell friends and classmates about their condition?
- Does your child have friends that they can talk with about their condition and problems?
- Do you and/or your child attend any support groups?

Identify Trauma: Ask cautiously and always use a trauma-informed approach. Include educators and other support staff who are knowledgeable about the student

- Has the student witnessed or been the victim of abuse or neglect (physical, sexual, or emotional)?
- Housing: Does the student have safe housing? For example, is there exposure to crime, violence, or social disorder?
- What are the socioeconomic conditions in the child's neighborhood? Is there concentrated poverty or other stressful conditions, such as presence of trash or lack of cooperation in community, such as civil unrest or violence?
- Does the family have access to resources to prevent & address communicable disease or illness outbreaks (e.g., flu, ability to obtain medicine)?
- Does the family have access to groceries, and/or a food bank?
- Are there any additional family stressors? For example, family illness, or unemployment.

Identify Academic Factors

- Has the student had difficulties such as: _____
- Skipping school, missing school (absentee), being late for school (tardiness), Lack of interest in school or school activities, School refusal, Taked about not liking school, Trouble making or keeping friends, Experienced bullying, Experienced isolation, Risk taking behaviors.

31

Resources

Section 504

- www2.ed.gov/about/offices/list/ocr/504faq.html
- www2.ed.gov/about/offices/list/ocr/docs/qa-reopening-202105.pdf
- Perry Zirkel JD perryzirkel.com/tag/section-504

Special Education

- IDEA 2004 information sites.ed.gov/idea
- Wrights law free newsletter <https://www.wrightslaw.com/>
- Council for Exceptional Children <https://exceptionalchildren.org/>

New School Nurses

- Missouri DHSS Home includes, School Health Index, Online Reporting Statewide User Manual, Announcements and Conferences, Frequently Asked Questions, Guidelines & Publications, Online Reporting System, School Wellness Project
- <https://health.mo.gov/living/families/schoolhealth/>
- Missouri Healthy Schools <http://www.mohealthyschools.com/>
- NASN Special interest group (SIG) information www.nasn.org/nasn/membership/current-members/sigs
- NASN Professional Practice Documents www.nasn.org/advocacy/professional-practice-documents
- CDC School Health Resources www.cdc.gov/healthyyouth

Chronic Health Conditions

- Asthma Link to SAMPRO Asthma Action Plan - available in English and Spanish https://www.aaspi.org/Aaspi/media/Media-Library-PDFs/Tools_for_the_PublicSchoolTools/16-asthma-action-plan-v10_hires.pdf
- Life threatening Allergies American Academy of Pediatrics Emergency Action Plan. https://www.aap.org/en-us/documents/AAP_Allergy_and_Anaphylaxis_Emergency_Plan.pdf
- Diabetes Refer to link for sample DMMP: <http://main.diabetes.org/dorg/PDFs/Advocacy/Discrimination/dmmp-form.pdf>
- Seizures <https://showtimecho.org/wp-content/uploads/2020/07/Patterson-Seizure-Action-Plan-Questionnaire-and-obsv-rsc.pdf>
- Sickle Cell Disease Find tipsheets here https://www.cdc.gov/mcbdddis/ck12eoll/documents/tipsheets_guide.pdf

32



References

References

- American Nurses Association & National Association of School Nurses. (2017). *School nursing: Scope and standards of practice* (3rd ed.). Silver Spring, MD: Authors.
- Centers for Disease Control and Prevention. (2020) Sickie Cell Tip Sheet. Retrieved from https://www.cdc.gov/naddd/sickiecell/documents/sickiecell_tipsheet_guide.pdf
- National Association of School Nurses. (2020). Use of individualized healthcare plans to support school health services (Position Statement). Silver Spring, MD: Author.
- Selekman, J., Shannon, R.A., Yonkalis, C.F. (Eds.). (2019). *School nursing A comprehensive Text*. Philadelphia, PA: FA. Davis.
- Substance Abuse and Mental Health Agency. (2014) Guidance for a trauma- informed approach Retrieved from <https://store.samhsa.gov/sites/default/files/n77prjwzma1a-4883.pdf>
- Taliaferro, V., & Resha, C. (2020). Trauma informed care. In V. Taliaferro & C. Resha (Eds.), *School nurse Resource manual* (10th ed, pp. 586-688).
- Will, S.I.S., Arnold, M.W. & Zaiger D.S. (Eds.). (2017). *Individualized healthcare plans for the school nurse: A comprehensive resource for school nursing management of health conditions*. Forest Lake, MN: Sunrise River Press.



33

01

Go To allergyasthmanetwork.org – look for online shop in the upper right corner

02

Look for School Nurse Chronic Health Assessment Tool – SN CHAT

How to Download SN CHAT

It's free & easy





School Nurse Chronic Health Assessment Tool – SN CHAT

A tool developed for school nurses by a school nurse, SN CHAT offers tools and resources to help school nurses manage chronic health cond...

Price: \$0.00

VIEW

34



QUESTIONS



We'll get to as many questions as we can!



35

Join us for our next webinar –

Oral Corticosteroids: When Is It Too Much?

March 10, 2022

4:00 PM ET
Dr. G. Marshall



36



Breathe Better Together

Allergy & Asthma
NETWORK

Allergyasthmanetwork.org

Please stay on the line for 2 – 3 minutes to complete an evaluation survey – Thank you!

