

School Nursing During a Pandemic

School nurses gear up for more COVID-related challenges this fall.

When schools closed in 2020 to prevent the spread of COVID-19, school nurses found themselves busier than ever. Districts called on them to interpret guidelines from the Centers for Disease Control and Prevention; educate students, staff, and families on disease prevention; set up in-school systems to screen, test, and isolate potentially infectious students; and assist public health departments investigating disease outbreaks in the school community and beyond. As it became clear that most schools would remain shuttered for months, school nurses resumed carrying out many of their regular duties remotely—providing basic health education online, connecting families to services for their health and social needs, and doing what they could to help students with chronic conditions stay healthy at home—all while many served on school and community committees charged with planning for the return of in-person instruction.

“We have many colleagues that were doing 12-, 14-hour days, seven days a week,” says Kathy Hasey, DNP, MEd, RN, one of two directors of the Northeastern University School Health Academy (NEUSHA), a Boston-based provider of continuing education to school nurses. Those are long days, and that was in Massachusetts, where school nurse staffing surpasses that of most other states.

The pandemic left many school nurses wondering how to perform a job that was already exceedingly challenging. “The workload is tremendous, it was tremendous prior to COVID,” says Robin Cogan, MEd, RN, NCSN, a school nurse in New Jersey’s Camden City School District and an *AJN* editorial board member. “There have been school nurses that have resigned, there have been school nurses that are taking early retirement, there are school nurses who will not be coming back next year.”

Erin Maughan, PhD, RN, FNASN, FAAN, director of research at the National Association of School Nurses (NASN), surveyed school nurses during the pandemic. “They’re exhausted,” she reports, but adds they are no less committed to the children and schools they serve. Most have stayed on the job and adapted, with some blazing new trails.

CONTACT TRACING

Take, for example, contact tracing—an essential public health activity in any epidemic. In many



In Alamogordo, New Mexico, the Alamogordo Public Schools’ crisis intervention outreach program, Healing Opportunities, Prevention, and Encouragement (HOPE), addresses the increasing COVID-related mental health needs of local high schoolers by parking their Winnebago outside schools and providing students with information and resources. Shown here are HOPE’s mental health coordinator, school counselors, and executive director. Photo courtesy of the APS graphics department.

municipalities, school nurses pitched in to help local health departments, many of which were small and didn’t have nurses of their own. The partnerships strengthened the relationship between school nurses and public health officials, built community confidence in the contract tracing process, and gave health departments advance intelligence of outbreaks connected to student events. The arrangement was a lifeline for understaffed public health departments but put extra strain on school nurses.

“This has been the most challenging year of my career,” says school nurse Wendy Rau, MSN, BA, RN, “and most of our school nurses would say the exact same thing.” As the supervisor of health services for the Lincoln, Nebraska, public schools, Rau knew she had to do something about the labor-intensive nature of contact tracing when schools reopened last fall. Her passion for data-driven solutions led her to collaborate with the city’s computer services team. Together they modified the district’s document-sharing platform to reduce the administrative burden of contact tracing. The system began notifying Rau and school administrators when students tested positive for COVID-19, and it generated follow-up letters to families, explaining isola-

tion protocols, symptoms to watch for, and how to access remote learning. This freed school nurses to concentrate on gathering information and educating students and families.

The centralized data collection also allowed Rau to track the spread of COVID-19 in Lincoln's schools. She says only 0.9% of school-exposed close contacts tested positive for COVID-19. In short, they kept students safe. "School spread has been very minimal," she says, adding that for students, parents, teachers, and staff "that's very reassuring."

TAKING CARE TO THE STUDENTS

When schools sent students home last year, one school nurse found inspiration in an idle, 40-foot-long Winnebago that had previously served as a mobile clinic. "We needed to get out in the community," says Lisa Patch, MSN, RN, NCSN, executive director of health services for Alamogordo Public Schools, a rural New Mexico district serving 5,500 students at 15 sites in an area with high rates of poverty. "The beauty of school nursing is that there is a nurse where the kids are, and that's what we had to do again," she says.

Funding from the Coronavirus Aid, Relief, and Economic Security (CARES) Act made it possible for Patch to purchase the Winnebago. After extensive renovations, the vehicle—nicknamed Flo, after Florence Nightingale—took to the road. Patch's team has used Flo to conduct COVID-19 testing, distribute food and school supplies, and assist at COVID-19 vaccination clinics. The district is currently seeking to become a licensed vaccine provider for students and their families.

Using Flo, Patch and her team also bring water, snacks, and helmets to an Alamogordo skate park each Wednesday afternoon to connect skaters with mental health counselors, tutoring, and other resources. "A few students have lost family members through this," Patch says. The skate park outings provide a way to find out how the kids are doing.

AUGMENTING STAFFING CONCERNS

In Cogan's view, the success of all these efforts hinges on staffing. "There needs to be a school nurse in every building, because we can't do the work if we're not present," she says. According to the NASN, an estimated 25% of schools have no school nurse, and only 39% employ full-time school nurses. It's not uncommon for school nurses to serve several schools in their districts, especially in rural areas.

Few policy makers are familiar with these statistics, and even local health officials don't always appreciate how thin school nurses have been stretched during the pandemic. "Some of our health

officers in the health districts didn't realize all of the things that school nurses were doing in that setting," observes Liz Pray, MSN-Ed, RN, NCSN, president of the School Nurse Organization of Washington (SNOW).

During the last legislative session, Washington State doubled the biennial budget for its School Nurse Corps, which serves its rural school districts. This increase is the first in roughly 20 years. The additional money will allow the corps to provide one more day per week of nursing services for all small, rural school districts, but the funds are only a partial solution to Washington's school nurse staffing woes.

In the spring, the Biden administration announced it had allocated \$500 million in American Rescue Plan funding to hire school nurses. A statement from the White House dated May 13 noted that school nurses "can offer medical expertise to support parents and teens as vaccination options for younger people expand." The plan's \$122 billion Elementary and Secondary School Emergency Relief Fund may also be used to hire school nurses. Pray says SNOW is urging its members to advocate using the state's share of these federal funds to augment school nursing ranks. "We keep hearing that you shouldn't be hiring staff with that money because it's not sustainable," she says, while noting she believes the need is urgent.

School nurses figure prominently in *The Future of Nursing 2020-2030: Charting a Path to Achieve Health Equity*, released by the National Academy of Medicine earlier this year. The report calls for new funding streams and reimbursement mechanisms to support this underresourced sector of the nation's public health infrastructure.

Delaware, the only state in the nation to mandate at least one nurse in every school building, offers one model. Local education dollars for school health services are bolstered with state funds and Medicaid reimbursement. The states in New England use different funding models but also provide better access to school nurses than most other parts of the country. A cost-benefit analysis of state funding for school nurses in Massachusetts estimated that the program more than paid for itself after factoring in avoided medical care costs and increased parent and teacher productivity at work.

Some Massachusetts communities used CARES Act funds in 2020 to add school nurses who could liaise with public health officials and meet pandemic-related demands. Jenny Gormley, DNP, MSN, RN, NCSN, NEUSHA's other director, gives the example of the Hudson Public School district, where she previously worked as director of health, nursing, and safety. The district already had at least

one nurse in each of its school buildings but hired a second nurse for one of its schools in recognition of the need for additional support.

THE LOOMING MENTAL HEALTH CHALLENGE

According to a fall 2020 survey by the Jed Foundation, roughly one-third of parents said their children's emotional or mental health had worsened during the pandemic. Because suicidal ideation has been on the rise for years, it's harder to tease out the pandemic's effects on this particular measure; however, this past May, Children's Hospital Colorado declared a state of emergency over youth mental health. Pray says one of her colleagues reported multiple suicides in her district while students were at home.

Whatever the precise magnitude of the challenge, school nurses will find themselves face-to-face this fall with students recovering from a pandemic-fueled roller-coaster ride of uncertainty, insecurity, and loss. Tens of thousands experienced the death of a parent due to COVID-19, and countless more are grieving other losses. Even in prepandemic times, almost one-third of visits to school nurses were attributed to mental health.

Cogan, who has run two weekly support groups during the pandemic, is also concerned about the mental health of her school nurse peers. "People have shared this sense of universal trauma, grief, worry—feeling that their professionalism is being questioned. When a nurse of 25 years says to me, 'I have never felt that I didn't know what I was doing until now, because people question every decision I make,' that weighs on us."

NEUSHA has released webinars related to a wide range of pandemic-related issues and a six-part series on compassion and well-being to help gird school nurses for their continued pandemic journey. Meanwhile, debates over whether to require COVID-19 vaccination for schoolchildren could become another political flash point this fall, adding stress to an already stressful job. School nurses will also have to face their growing suspicion that they can't do it all, at least with their current numbers.

"Being able to successfully reopen our buildings, to bring back some kind of new normal . . . we could play a very vital role in that," Cogan observes. "But we have to be present, and we have to have the bandwidth to be able to do it."—*Nicole Fauteux* ▼