

## School Health Advisory Board Agenda 1/31/24

Present: Rebecca Abernathy, Lori Balaban, Gemila Boubier, Erin Callas, Connie Clark, Kristy Davis, Brenda Doremus-Daniel, Eileen Gomez, Kevin Kirst, Mark Niehaus, Chris Siebert, Diana Webb

### Presentation of Annual School Health Data

Eileen presented the data she submits to the VDOE each school year:

- School clinic visit report summary SY 2022-2023
- Chronic conditions 2008 through 2022 – 2023

Is anyone following the data over time? Running the data through some Excel functions may be instructive in identifying trends.

Asthma and food allergy action plans are requested for annually. It would help physicians if their signature is required only on the action plans rather than also on the medication authorization form. Since parents are required to sign the authorization form, nurses could attach a copy of the action plan to the authorization form as evidence of a physician signature.

The physicians requested that the nurses include the name of the medication when faxing a form for signature.

**[Governor's Order #28](#)** Requires that school divisions notify all parents in the school division when a school-connected student overdose occurs with 24 hours of the event using regular communication channels and protecting student privacy. The VDOE posted [best practices](#) to comply with the order.

Points in the ensuing discussion included:

- The goal of the notification is to increase parent awareness of the dangers of opioid misuse and provide them with resources and information about preventive efforts underway in schools.
- Acknowledging that schools may not always know if an incident turns out to be an overdose or another condition, the mandate is for a good faith effort when the information is available.
- Definition of overdose is left to localities. After deliberation, the board recommended the clinical definition of overdose:

*A life-threatening condition resulting from the ingestion of too much of a substance or substances where the individual is non-responsive, has decreased or stopped respiration and heart rate, and a blueish discoloration of the skin and/or nailbeds (cyanosis).*

*Emergency medical treatment is necessary for an overdose, which may include the administration of naloxone, activation of the EMS and medical transport. Rescue breathing and CPR may also be necessary.*

Narcan Protocols: Eileen shared a draft of a proposed naloxone protocol. The physicians on the board stated that a trained individual can administer naloxone in the absence of the nurse since administering if when it is not needed is harmless. But an unresponsive individual should always be assessed per the BLS.

### Offerings in Cafeterias and the Wellness Policy [JHCF](#)

Eileen reported the concern of a nurse and parent that ice cream or cookies are available for purchase in the cafeteria nearly every day in violation of the wellness policy. The nurse reported that she was told

the items were offered in an attempt to bring in additional funds to help the CNS program break even. The board requested that the director of the CNS attend an upcoming meeting to discuss this issue.

- The wellness policy may be inconsistently enforced. Some teachers and other staff use treats as a reward system. Schools may not have designated personnel to audit and enforce the policy. Perhaps a reminder to principals is warranted.
- The birthday party protocol that was developed by the SHAB years ago should be referenced for rewards other than unhealthy treats.
- The practice of a reward systems that includes candy for students with disabilities may be effective in the short-term, but not for the long-term health and development of these students.
- Schools should be a model for good nutrition and healthy choices. Once in a while a treat may be appropriate in a case-by-case basis.
- A suggestion was made to have the School Board review the wellness policy to increase awareness of its existence and importance.

### **Sentara Cares Grant**

Eileen reported that she and the family support workers determined the greatest unmet need was dental care for students ineligible for Medicaid since the FSW said they are able to help families complete the application for reduced cost medical care through UVa, but not for dental care. They decided to narrow the scope to the Lambs Lane complex schools. She reached out to area dentists who agreed to see students on a fee-for-service basis. She also has a contact at the [Piedmont Regional Dental Clinic](#) where appointments can be arranged at a lower cost.

- There is a community-wide shortage of dentists
- Consider applying for other funding sources such as [Bama Works](#)
- Consider using the RAM
- Elizabeth Carpenter is the care coordinator at UVa's refugee clinic and she may be interested in partnering to arrange dental care for student who work with the IRC.
- [Smiles Mobile Dentists](#) may be worth considering. Eileen learned that they offer services to students who can pay or who have insurance including Medicaid, and they have a grant program where they offer free care to 5 students for every 20 insured or paying patients. This may be a viable option when partnered with the IRC students who do have a funding source but lack of access to dentists.

### **Gun Safety Session**

The School Board and cabinet expressed interested in firearm safety given that firearms are a leading cause of injury and death in children. Lakeside Middle School will host a fire arm safety event on Feb 8 from 6:30 to 7:15 pm presented by [Be Smart for Kids](#). It is likely that an event like this will attract more parents who have the time and bandwidth to be thinking about responsible gun safety, and not the segment of the population who may have too many competing demands on their attention. Free gun locks can be obtained at [Region 10](#), for patients' families at Pediatric Associates and possibly other locations.

### **Life Vac Update**

Eileen reported that the LifeVac company offered free devices to every public school in the country and Mill Creek Orthodontics purchased two devices and a wall mount for every ACPS public school. She

wrote a protocol for their use if the BLS measures do not succeed in dislodging a foreign body, and welcomes feedback.

### **Vape detectors at AHS**

Eileen reported that the staff at AHS are very happy with the vape detectors that were installed in the AHS student bathrooms because they have been effective in curtailing vaping in those locations.

Unfortunately, students have found other clandestine ways to vape.

- There are a host of products available for easy undetectable vaping such as a vape hoodie, a pen that writes on one end and offers a vape on the other and vape devices that resemble inhalers
- 1 vape cartridge can contain as much nicotine as 2 packs of cigarettes
- Connie offered to provide parent and/or staff education about vaping as well as Stop-the-Bleed training for staff and/or students

### **COVID Protocol in an Outbreak**

Eileen described the ACPS protocol for managing illness symptoms that arise at school and explained that students are not required to stay out of school when normal illness criteria resolve except when identified as a close contact of someone with COVID in the preceding 10 days. An outbreak is defined as 3 or more cases epidemiologically linked as declared by the health department. Other mitigation strategies may be recommended in outbreak situations.

- Severity of symptoms in an exposed individual is not a predictor of a COVID infection
- People with mild or no symptoms can still be contagious

### **Balance of Attendance Promotion and Health-Related School Exclusion**

The time ran out before reaching the topic of addressing chronic absenteeism, requiring doctor notes for absences, excluding students for illness symptoms and incomplete immunization records. This will be at the top of the agenda for the March meeting.

### **Remaining Meetings:**

3/20

5/15

### **Attachments:**

- 1) Health data reports x2
- 2) Narcan Protocol x 2
- 3) LifeVac Protocol