



Health Services Department • Lincoln Public Schools • 5901 O Street • Lincoln, NE 68510 • (402) 436-1655 (Fax) 436-1686

My Reflections As I Prepare to Leave LPS

by Judy Zabel RN, MS, NCSN Supervisor of Health Services



All those initials reveal my journey through life as a nurse. I always wanted to be a nurse. I have several family members in the medical/nursing field and it was always my dream to be a "missionary" nurse. I never made the missionary part but did become a

nurse.

I am number 7 of 9 children raised on a farm south of Cambridge, NE. Life was good on the farm, and family was, and is very important to me. My formal schooling after high school was Bryan Hospital School of Nursing; graduating in 1966 and passing my State Boards to become an RN in September 1966. I also married my high school sweetheart in August 1966. After moving to Maryland in 1967, I started back to school and graduated in 1970 with my BSN from the University of Maryland. That same day we landed in Rio de Janeiro, Brazil where we lived for 1 ½ years. On returning to Maryland I continued my nursing education, and graduated with my Masters Degree in nursing in 1974. Our son Jason was born in January 1974 and my husband Paul died in August 1974. Jason and I moved back to Nebraska in 1976 to be closer to

My nursing career has included hospital nursing at Bryan Hospital in Lincoln, NE; National Institutes of Health in Bethesda, MD; Holy Cross Hospital in Silver Springs, MD and Saint Elizabeth Hospital in Lincoln, Nebraska. I have taught nursing at the University of Maryland in Baltimore, MD and the University of Nebraska Medical Center in Lincoln, Ne. I have also worked as an educational consultant for the Nebraska State Board of Nursing and practiced

school nursing for LPS for the last 22 years. Nursing is a profession and membership and activity in professional organizations has also been an important part of my career. I have been active in the American Nurses Association, Nebraska Nurses Association, and the National League for Nursing; Sigma Theta Tau National Nursing Honor Society, National Association of School Nursing, and the Nebraska School Nurses Association. I am also a member of LEA, NSEA, NEA and Delta Kappa Gamma Society International. I studied for, took and passed the Certification Examination for School Nurses in 1994, and have maintained my NCSN since then. That is just a little bit about me. Oh, yes, one other thing. I love to travel and have visited 6 of the 7 continents. Antarctica is on my to-do list.

School nursing over the years: My 22 years as a school nurse have been a wonderful adventure of learning and being entertained. Children do say the "darndest" things. I only wish I had been smart enough to write down all of the complaints, attempts at describing a body part etc. that students have said. My first school nurse assignment was 4 elementary buildings, with 3 new health paras. We had a great couple of years. I always say I learned two very important things that first year. One, never assume that the parent's last name is the same as the students -- and two, it is always someone else's fault. Those two things are still relevant. I have had assignment changes over the years that have included other elementary schools, a middle school, (Jr. High at the time), a high school and Early Childhood Special Education.

Most recently, my position has been the Supervisor of Health Services, which requires me to look at the big picture; how Health Services works to assist in keeping students healthy and in school, ready to learn. The other side of the equation is to assist those who have health/medical needs, to receive the care they need so they can return to the classroom. Being a school nurse is like being a fish out of water. The language is different, the working conditions are different, the expectations are different, and the rules are different than the typical nursing position in a medical setting. BUT people are the same everywhere, and when they don't feel well the nurse is a safe person with the knowledge and skills to help.

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"The strongest principle of growth lies in human choice"

-George Eliot (1819-1880)

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Lincoln Emergency Department Connections

by Liz Post, RN

School Nurses have had several discussions this school year with Tom Hoover, RN from Lincoln E.D. Connections. This fairly new program is focusing on students who have Asthma that is not properly managed, and who make frequent Emergency Room visits.

What is E.D. Connections? It is a program designed for people who tend to overuse the Emergency Department simply because they lack a "medical home" and/or are not knowledgeable about community resources that are available to them. The goal of the program is to connect them to a total healthcare program for healthier lives. Both BryanLGH Medical Center and Saint Elizabeth Regional Medical Center participate in this program.

It is a free program in Lincoln/Lancaster County for people who have used the Emergency Department three or more times in the past six months. A registered nurse works with the individual/family to find a medical home, provide necessary medication and to connect individuals and families to other community resources. The case manager also assists with transportation and financial issues, makes appointments or referrals for services, and will go to a doctor's appointment with individuals to ensure the best care possible is being received.

What is PENELOPE? It is the system into which the school nurses enter referral information for students whom they feel could benefit from Lincoln E.D. Connections.

Parents/guardians need to sign a Release of Information before referrals can be made.

Bibliography: Extracted from Tom Hoover's Emergency Department Case Management: Evidence Based Results. Tom Hoover is at

BryanLGH Medical Center.

Nolan, L, Vaquerano, L., Jones, K, Regenstein, M., (March 2004). Urgent Matters Safety Net Assessment, Lincoln NE. Retrieved March 8, 2007 from http://www.urgentmatters.org/aboutProject/reports/Final_Lincoln.pdf

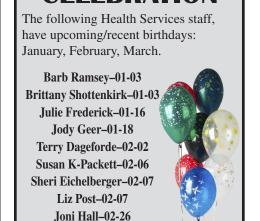
My Reflections As I Prepare to Leave LPS

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Change is and has been a constant -healthparas are now health technicians. We've gone from paper logs to Student Health Manager to Sapphire School Nurse web based electronic records. We now use email for the majority of our communications among parents and school staff, as well as within Health Services. But sometimes the touch of a hand, the eve contact, the occasional hug is needed to soothe the soul. As the school district has grown, the numbers of students with medical needs have also grown. As society has changed, the mental health and social needs of students have changed. As medical care has improved, we have seen an increase in the number of students requiring nursing procedures/ assistance during the school day to allow them access to an education. BUT we still have those with scraped knees from a fall on the playground, the paper cut, the chapped lips, the need to get out of "math" class when it gets too difficult. The health office is a safe place for some TLC (tender loving care). We now have Individualized Health Plans (IHPs), 504's, Self-Manage Contracts, the Emergency Protocol for Severe Asthma/Anaphylaxis, a Pandemic Flu Plan, and the list goes on.

I feel like I have been rambling a bit, but children still are in school to get an education. Every encounter with a student, a parent, a staff person is an opportunity to teach. The desire to serve others through hands on care, teaching, responding in an emergency (just being there), is the heart of school nursing. I have really enjoyed this wonderful ride.

Judy



Best wishes on another milestone!

Kay Holt-03-10

Dianne F-Smith-03-27





Spring Weather, Not So Much Fun!

by Liz Post, RN

When we think of spring, we usually envision new tree leaves unfurling; bright flowers, dew on the grass and baby birds singing around us. Some of us also think about what kinds of bad weather may be approaching. The following is a refresher on what some of the weather terms mean and what can be expected.

Advisories – these are issued when events are expected to remain below the warning criteria

Watches – conditions are favorable and there is a good chance that the event may happen. These are intended to heighten public awareness and to begin making preparations for the upcoming event.

Flash Flood Warning – issued in response to a few hours of locally heavy rainfall or water released from an ice jam in flooding nearby land.

High Wind Warning – issued when high wind speeds may pose a hazard or are life threatening.

Severe Thunderstorm Watch -

conditions are favorable for development of a severe thunderstorm. Tornadoes may occur in the watch area. Make preparations in case a weather warning is issued.

Severe Thunderstorm Warning –

tornadoes and/or severe thunderstorms are occurring and have been spotted; winds 58 mph or hail greater than .75" in diameter (about dime-sized). There is imminent danger for people in the area warned. Stay away from windows, doors and outside walls. Go to the lowest floor and if there is no basement, go to an interior bathroom or closet.

Tornado Watch – conditions are favorable for the development of severe thunderstorms and tornadoes. Make preparations in case a weather warning is issued.

Tornado Warning — Tornadoes are occurring and have been spotted or detected by radar. There is **IMMINENT** danger for people in the area warned. Stay away from windows, doors and outside walls. Go to the lowest floor of your building. If there is no basement go to an interior bathroom or closet. Get out of your vehicle. If there is no shelter, lie flat in the nearest ditch or ravine with your hands protecting your head.

When we are at work in our buildings, we must follow the Emergency Plans.

At home we need to stay alert; watch the sky and listen to the Weather Channel, or wherever we obtain our news. Have a plan for yourself and your family. And be patient, the sun will eventually shine again after the storms pass.

Source: The Weather Channel









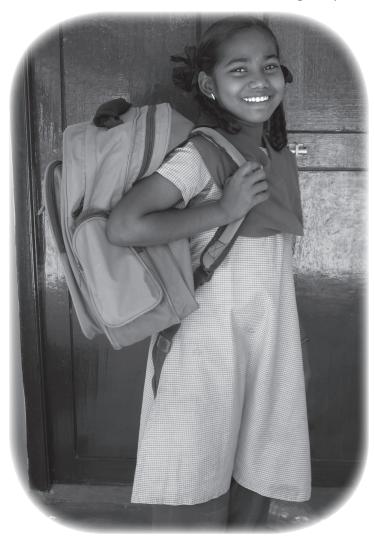
Cultural Corner____

Travels to Southern India

by Kay Holt, RN, School Nurse

Several years ago, I was sitting in church watching a video about an orphanage in India that serves very poor rural girl children. As a school nurse, I have a huge heart for kids and was very deeply touched by the video. Through a series of amazing events over the past few years, my husband and I have become the directors of a ministry at our church called "Project Hope." An outreach program was created that links members of our church with the children at Pratheeksha (meaning "hope") Orphanage in southern Tamil Nadu, India. The purpose of the outreach is two-fold. The first is to provide each child with a "family" that cares about them personally. The second is to take care of their daily needs financially. A monthly pledge provides for the child's food, clothing, shelter, medicine and education.

Pratheeksha welcomes children in need irrespective of caste,* creed, sex, or religion. The orphanage is really specific to the needs of girl children who are often rejected due to economic, social and financial circumstances. Girl children, especially in





rural areas, do not appear to have much value and are more often considered an encumbrance due to the age-old custom of dowry,* They are not allowed to be a support to their parents and they are not given equal job opportunities.

About eighty-eight percent of the population identifies as Hindu in Tamil Nadu. Christians and Muslims together form over eleven percent of the population. Tamil is the only official language in the state. English is also in common usage as an official language of India, especially in more urban areas.

Economic reforms since 1991 have transformed India into one of the fastest growing economies event though it still suffers from poverty, illiteracy, disease, and malnutrition. Many women are malnourished too. Half of children are underweight - one of the highest rates in the world and nearly double the rate of Sub-Saharan Africa. According to the World Health Organization 900,000 Indians die each vear from drinking contaminated water and breathing in polluted air. Only one of three Indians has access to improved sanitation facilities such as toilets. It was not unusual for me to see people toileting on the roadsides during my travels. Malaria is endemic in India. The HIV/AIDS epidemic is a growing threat. It is estimated that 2-3 million people in India are living with AIDS. Maternal mortality is the second highest in the world. Only 42% of births are supervised by health professionals. There are about 60 physicians per 100,000 people in India. Approximately one million people, mostly women and children, die in India each year due to inadequate health care.



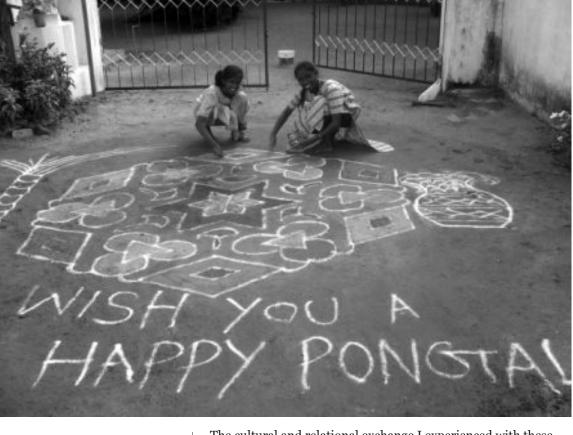


I have had the privilege of visiting Pratheeksha twice. During my visits, I was greeted by happy children that displayed a rich tradition of culture, faith, music, art, and dance. My first visit was during the festival of Pongal, a four-day harvest festival that is one of the most widely celebrated in Tamil Nadu. It reminded me of Thanksgiving in the U.S. The children ate a feast of rice, which is the staple food of Tamils and is typically eaten with sambhar, a vegetable stew dish common to South India. Chicken, fresh mangos, bananas, and sugar cane were also served. They are more rare treats. The kids were very grateful to have full tummies. Food is usually served on a banana leaf instead of a plate and eaten with the right hand.

A word of advice if you

travel to India, always shake an Indian's right hand. The left hand is reserved for toileting and considered unsanitary.

Traditional Indian dress varies across the regions in its colors and styles and depends on various factors, including climate. Popular styles of dress include draped garments such as saris for women and dhoti or lungi for men.



The cultural and relational exchange I experienced with these beautiful Indian people has enriched my life immensely. I would encourage anyone who has the opportunity to embrace a different culture to "go for it."

*Caste - social class of traditional Hindu society

*Dowry - money, goods, or estate that a woman brings to her husband in marriage

Immunization Update (Tdap)

Routine: Adolescents 11 through 18

- A dose of Tdap is recommended for adolescents who got DtaP or DTP as children and have not yet gotten a booster dose of Td. The preferred age is 11-12.
- Adolescents who have already gotten a booster dose of Td are encouraged to get a dose of Tdap as well for protection against pertussis. Waiting at least 5 years between Td and Tdap is encouraged, but not recommended.
- Adolescents who did not get all their scheduled doses of DTaP or DTP as children should complete the series using a combination of Td and Tdap.





RETA Training

by Barbara Ramsey, RN



School principals, teachers, nurses, janitors, counselors, and others responsible for school safety gathered for a day presentation by Paul Timm, on School Emergency Preparedness. Paul is president of RETA (Ronald Eric Timm & Associates) an organization that has prepared staff in emergency preparation for 25 years.

Mr. Timm stated that any and all efforts you make toward campus/school security will pay off in the future, no matter how small or insignificant the efforts may seem. Removing a small stone from a door propped open, or noticing and taking action when a familiar visitor has a sudden change in demeanor all seem inconsequential. These are examples of small efforts that save lives.

Paul began the training session with a Security Quiz and encouraged each employee to give thoughtful consideration to this quiz.

Security Quiz

Q. What is your primary means of Emergency Communication?

A. The 2 way radio should be your first choice. Take the 2 way radio with you whenever you leave your desk. Carry the 2 way radio with you at all times.

The land phone is the next choice. All telephones must have emergency dialing directions on the phones. Know if you need to dial a 9 before 911. The extension number for your main office should be posted on all phones. After hours emergency number should be posted by each phone. Your cell phone may be a secondary means of emergency communication but not the primary means. There should be intercom buttons connecting the main school office and each classroom. All staff should know what room number they are in for emergency use. Most of these systems have a panic or duress button on the intercom.

Q. What crisis supplies does your school have? Where are the supplies stored? Does everyone have access to these supplies?

A. All staff should ask where the supplies are kept and become familiar with what supplies are available.

Q. How many registered sex offenders live in your school zip code?

A. This link should be available on the school's home page: nsp.state.ne.us/sor/. If you are aware of these sex offenders on the school grounds follow the reporting process immediately.

Q. Who is the designated media contact for your school?

A. Each school has a designated public information officer. The district contact is Dave Meyer and Mary Kay Roth. Questions will be referred to them in an emergency situation.

Q. How do you manage suspicious mail?

A. If you have suspicious mail you will utilize 911 to manage this. Resource: Put www.usps.com in the search box, enter "suspicious" and you will be able to download a poster to use as a resource on managing suspicious mail. This site will provide a list of what constitutes contaminated mail.

Q. How do you keep the school grounds safe?

A. Outdoor recess monitors should wear a bright colored vest so that students can readily identify the monitors.

Students will feel safe and will behave more appropriately when the monitors are visible; criminals who see a force of monitors in place for students will drive on.

Outdoor recess monitors should place themselves strategically between the students and the street and around parameters. They should not congregate together or stand by the building. They should carry a 2 way radio as well as a pouch with emergency personal protective equipment (gloves).

Shrubs by parking lots and school entrances should be trimmed to less than 20 inches and trees should also be trimmed back.

Q. How do you correspond with students?

A. Only verbally. Never correspond with a student via Face book, emails or texting.

Q. How do you manage/control visitors?

A. A policy for identification (ID) for each visitor is a must. Name tags should be Lanier tags; it is also important to evaluate each visitor's manner and attitude. Establish eye contact and ask how you can help them. Employ deescalation techniques if they are upset and remove them from the student population.

Student safety is a continuing concern in today's school system. The schools of today require constant vigilance from all employees in all departments. Conferences such as this unite staff in the common and important goal of maintaining a secure environment for our students and staff.





In the Spotlight



Wendy Rau, RN Lincoln High, School Nurse

I was born and raised in Omaha. Nebraska. Although, when I was very young my mother and I moved back and forth from my grandparent's farm in Panama, Iowa to Vallejo, California. This was when my father was in the Navy during the Vietnam War. My Mother, Leola Royal, and I staved on the farm most of the time but when my Dad, Bill Royal, had leave from the Navy we would travel to California. My Dad was overseas when I was born. One of his favorite stories to tell is that I was 15 days old before he was informed of my birth! He says it must have been classified information.

When my Dad was discharged from the Navy, we settled back in Omaha. My dad was a Fireman for the Omaha Fire Department. My mom stayed at home with my two younger sisters and me. I attended Our Lady of Lourdes for Elementary School and Junior High. Then I started Mercy High School, which is a small school in Omaha. Mercy was not only a Catholic School but also an all girls' school. I always loved school and loved a challenge. The best part of high school was the close friendships I made. The best part of an all girls' school was never getting ready to go to school. My friends and I, literally, would roll out of bed and go to school. It made for some

scary yearbook pictures. In school, I developed a love for being active. Growing up I was involved in many sports: swimming, softball, cross-country, plus a little bit of basketball and soccer. Another thing that I learned at a young age is the importance of a good work ethic. I have had a job since I was 14 years old. My work experience includes everything from fast food, working in a flower shop to working at the Nebraska Legislature.

After High School, I moved to Lincoln, NE and attended the University of Nebraska. While at the University, I was a member of Alpha Omicron Pi Sorority.

"It truly is about the

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relationships you

This made the college experience both a learning experience and a social event. I met my future husband, Jason Rau, while at the University. He was a member of the Lambda Chi Alpha Fraternity so we had many mutual friends. We started as friends and didn't date for quite awhile.

We actually got "fake pinned" before we started dating. I think we were both just looking for an excuse to have another party. I did find time to study and I graduated with a Bachelors Degree in psychology, although I wasn't sure what I wanted to do next.

After much thought, I decided nursing was the career for me. I moved back home to Omaha. My parents were very excited to have me at home, again! I started in Creighton's Accelerated Nursing Program. It was a very rigorous program and I didn't have time for much more in my life, except studying and clinical work. Jason was very understanding. He had taken a job in Omaha while I was in nursing school. The year I spent at Creighton went by very quickly and I started looking for jobs.

At age 23, my first job in nursing took me to Kansas City, MO. I started my career as a psychiatric nurse on a drug and alcohol unit. This was an eye opening experience and very challenging. I loved it. I was getting to do detoxification and

group therapy as a new graduate. My time in Kansas City was limited because Jason was offered a great position with National Research Corporation back in Lincoln. I started at the Lincoln Regional Center (LRC) as a Treatment Coordinator in the Community Transition Program. I had a caseload of several patients with a variety of psychiatric issues, including schizophrenia, bipolar and borderline personality disorders, and ran the dual diagnosis program on the unit. Remember, I said I liked a challenge.

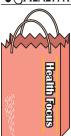
Jason and I got married in 1995. We had our son, Carter, the next year. Then three years later he got a little sister named

Sydney. After Sydney was born, I started staying home full time with them. I have wonderful children and I am grateful that I had the opportunity to have been able to be home with them. I will always cherish that time. It went by very quickly. Carter, now 13, is an 8th grader at Lux and

Sydney, age 10, is a 5th grader at Pyrtle.

After Sydney started 1st grade, I started my journey with Lincoln Public Schools. I began as a Sub-Nurse. I enjoyed traveling to different schools but I was excited when I was given the opportunity to take the School Nurse position at Belmont Elementary and West Lincoln Elementary, in 2007. I am currently the School Nurse at Lincoln High School. It has been an amazing experience working with students, their families and the dedicated professionals at LPS. It truly is about the relationships you develop with students, even if our time with them is very brief in the health office. I can't wait to see what each new day brings in the health office. It is always an adventure full of new challenges and positive experiences. My philosophy in the health office is to capitalize on the teachable moments. There is a teachable moment with every health office visit whether it is a reminder to wash their hands or teaching about their illness. It impacts their health on their journey to wellness.





Gayle's **Grab Bag**

This is a reminder that many of you still

have your Enhancement Funds which should be used up for this school year. Lincoln Public Schools provide each certified employee with \$225 (part-time staff receive a prorated amount) to be used for purchasing equipment and/or supplies in the classroom or for other work-related projects.

Purchases may be made using the following:

- 1) a purchase requisition to order equipment/supplies
- 2) the building procurement card
- 3) employee purchases which are then reimbursed

A minimum of \$50.00 must be requested before the reimbursement will be processed by account, on the Enhancement Funds Claim Voucher. Final claims at the end of the year will be processed for lesser amounts. This money may not be accumulated from year to year. If you need to know how much money you have to spend, please contact me.

Gavle Thomas Executive Secretary, Health Services Box 18, LPSDO lthomas@lps.org (402) 436-1657

Nurse Humor

Actual School Absence Excuse Notes

Author: Unknown

"Please excuse Gloria from school today, she is administrating."

"Carlos was absent yesterday because he was playing football. He was hurt in the growing part."

"Please excuse Jason for being absent yesterday. He had a cold and could not breed well."

Under the Microscope

Keeping tabs on what's new

New Employee

Gina Petersen, Health Tech., Sheridan Elementary

Resigned

Stacy Keller, Health Tech., Mickle Middle School

School Nurse **Angel**

-- Unknown Author

It takes one very special To keep our children well With skills to heal their illnesses But also the wisdom to tell That sometimes a hurt needs A band-aid And sometimes it needs a big hug That children can carry Big pain in their hearts, That a tummy can ache From the test of a "bug." God must have sent you here With a special purpose in mind For you are an angel in children's eyes,

The most caring and loving kind.

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Community

Need a free vision exam for one of "our kids"?

This is for the eye exam only. Go to www.aoa.org.
On the left side, find Public Health Box; click on VISION USA.

Eligibility Requirements

VISION USA™ is open to children and adults.

General eligibility requirements vary by state. For free services, you must:

- 1. Have a job; live in a household with one working member.
- Have no vision insurance (includes Medicare/Medicaid)
- Have income below an established level, based on household size.
- 4. Not have had an eye exam within two years.

Recreation Centers give "our kids" a place

Adult supervision at all times. No charge for drop in service. Must join and have an enrollment card on file at the Center chosen. Activities may include a pool table, table tennis, table games, TV and gym.

Call for more information

Air Park: 441-7876 • Auld: 441-7877 Belmont: 441-6789 • Calvert: 441-8480 Easterday: 441-7901 • F Street: 441-7951 Irving: 441-7954 Basic Needs—

For info. and/or referrals on programs and services, see pages 20-21 in the blue pages of the Windstream Telephone Directory or dial 211 (toll free number).

The Nebraska Family Helpline 1 (888) 866-8660

Collaboration between HHS & Boys town

New services for families looking for help with behavioral health and other services for children and teens.

Provides a single point of contact available 24/7. Supervised by licensed behavioral health professionals.

Blood Pressure Screening (free) Nebraska Heart offers

free blood pressure screenings twice a month. Visit the Nebraska Heart table, located next to the customer service desk, at Westfield Shopping Mall in Lincoln.

7:30 a.m. - 9:30 a.m. 2nd & 4th Thurs. each month Westfield Shopping Mall, Lincoln

Family Health Services Inc. 630 N. Cotner Boulevard

Suite 204 Lincoln, NE 68505 Ph. 466-1012 Services Provided:

-Medical

-Education and counseling -Referral/links to Community Resources

Accept appts/walk-ins For an appt/info. Call 402-466-1012

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SCC Con. Education Center 301 S68th St. Place, Rm. 401 402-437-2700 April 8-May 27th 6-8pm 14 contact hours Tuition \$89 unuw.southeast.edu