

Caring for Frequent School Nurse Visitors

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I love hearing from practicing school nurses and learning about their approaches and helpful hints in caring for frequent visitors. I've tried to group these thoughts and ideas within what seemed to be popular themes.

Helping students whose visits occur when they are scheduled to be in class:

- give an appointment time for a recheck
- invite the student to eat lunch with you
- make a habit of asking which class a child is coming from, or going to, and have a simple way of keeping track of that information
- pay attention to when students visit...is it between classes, during class, early AM, after lunch, last class visits? what could this mean?...social anxiety: inability to enter a class once others are seated, not having a group to sit with at lunch, issues with class content/subject matter/teacher/classmates, ADHD, eating disorder,
- with kids who insist on leaving class, make a classroom "house call" to assess them, rather than having them leave class to visit you....this will involve working closely with teachers and require teachers to phone or message you
- help child to break the day into one class at a time, rate classes from least to most stressful....maybe color code (red, yellow, green) congratulate child for each class completed, especially the red ones!

How to put constructive limits on "touch time" visits

Do you see children whose visits seem to be related to needing just a warm contact touch point with a caring adult?...remember, this can be the beginning of opening the door to what is the true unmet need...when a child feels that there is an adult at school that genuinely cares, truly "sees and hears" , and is glad to see them, **school connectedness**, is fostered, which is associated with consistent attendance and ultimately increased graduation rates. Here are some strategies to help them get the attention they need and also minimize time away from the classroom:

- timer on desk set for a specific number of minutes, which you share with the child
- use "parachute passes" ...say to the child: "I know it's hard, but I believe in you and I think you can try. Here's a special pass. It's called a parachute pass so you can leave class if you absolutely can't stay and need a BREAK. Give it to the teacher. You won't need to explain because they know what it means and that you are working with me."
- planned "first thing in the morning assessments" ...can create reassurance that you are present if needed but that you have "cleared" that child for class. "Today you are OK!!! and I'm so glad you came to school"...remember that you may be the ONLY adult that child feels "sees them" truly notices them, and sends them genuine warmth and kindness
- "you don't have to be "sick" to visit"...plan a time when the child can visit
- formulate a "frequent visitor" care plan written in conjunction with counseling department, teachers and parents toward goal of helping child to stay in class/come to school

Encouraging self-reliance and resiliency

- "what would mom, dad, grandma, nanny do for you at home"
- "what works when you feel this way"
- "sometimes everyone does not feel 100%, but it is still ok to be in school...this little rest/saltine/cold water/cold pack/eucalyptus can help a little...but after the next class, OR ...if A,B, or C happens, I want you to come back and see me"
- use humor... "I think you are CURED!"

Meeting unmet physical needs

- have extra clothes on hand (socks, new undies, black beach flip flops (on sale at end of summer, dollar store)
- newspapers for drying wet shoes (stuff shoes with papers, wait 10 minutes, remove and repeat)
- simple foods (saltines, oyster crackers, small apples, clementines /whatever is in season)
- small paper cups for water/ some kids avoid drinking fountains
- baggies for small bags for ice/ or to hold a wet and frozen paper towel
- possible funding sources (PTA, ANGEL fund- Shriners, will fund requests , no questions asked, Shriners (through their burn treatment centers) also have a program for funding laser removal of gang related tattoos, local groups (in our town we have an agency called "Just Because"), project for community service (Scout Troops, Church youth groups, National Honor Society)

Create a welcoming climate in your clinic

- soft music
- dim lighting, turn off the fluorescents and use lamps...keep your eyes peeled on trash day for free ones!
- design bulletin boards that draw kids attention with topics that interest them (for high school list caloric content of favorites from fast food/convenience store choices..ex: a small burger with mustard vs a Whopper with cheese and mayo, an ice coffee with skim milk vs a coffee coolatta with whipped cream
- walk the campus with your walkie talkie to get the pulse of your school and its climate, become a careful observer of who hangs out where

IMPORTANT! Recharge yourself

Caring for frequent visitors can be hard work, and frustrating. It may be difficult (or impossible) to convince others around you that this important work is essential, and even lifesaving to some of our most vulnerable children. Do it anyway. There is rarely a "quick fix". You may never learn **the true reason** behind these visits, but know that your genuine interest and warmth may be the only reason a child comes to school! Your kindness, no matter how small, may be planting a seed of hope and fostering positive self worth in a child who may just present an "annoyance" to the others in their daily life.

Keep a box/album of thank-you notes, cards or other mementoes from children and their families. When you have a tough day, take out this "sunshine box" to remind yourself that there is no greater calling than to have been important in the life of a child.

When you are feeling discouraged:

Say to yourself : "Today I saw 70 kids (or however many!). That is amazing and exhausting and most of the time, I was welcoming, kind, patient and pleasant. I think I accurately assessed each child, given the info/ time that I had at that moment. I tried to make each child feel worthy of my time and attention....and guess what...I may have lost a paper record, but not one child!...no 911 calls or 51A situations, no one had meningitis, bruising and tiredness which could be early signs of leukemia, or was bitten on the way to school by a dog with no rabies immunization... I did laugh really hard when _____(fill in the blank) ... hopefully, tomorrow we will all be back here to to try it again!