

TEXAS SCHOOL NURSES ORGANIZATION

819 W. Arapaho Rd Suite 24-B #345

Richardson, TX 75080



PRESIDENT REPORT

Lisa Sicilio, MEd, BSN, RN, NCSN

October 2018

Promote NASN/TSNO as Professional Organization

- 2/24/2018 – UTMB School Nurse Conference TSNO Exhibitor
- 4/10/2018 - *School Nursing: A Specialized Practice of Professional Nursing* presentation to Texas A&M College of Nursing BSN Students
- Ongoing Posts to TSNO's Facebook and Twitter
- Responds to multiple TSNO Web Contact Emails
- Contact Governor Abbott's office for School Nurse Day Proclamation
- Newsletter Editor (Developed with SMORE.com and disseminated through Facebook, Twitter, Email, TSNO School Nurse Net, Pinterest, and the TSNO website)
 - a. December 2017
 - b. February 2018
 - c. March 2018 (Camp Nursing)
 - d. April 2018
 - e. May 2018 (School Nurse Day)
 - f. June 2018
 - g. August 2018
 - h. September (Election)
 - i. October 2018

TSNO Committees

- Leadership Academy Planning
- Conference Planning Committee
- Finance Committee
- Bylaws Committee
- Scholarship Committee
- Advocacy Committee
- School Health Issues Committee

The mission of the Texas School Nurses Organization is to enhance whole student wellness in support of health and learning by strengthening school nursing practice. 1

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State Committees

- 5/18/2018 Appointed to The Department of State Health Services expert panel to review evidenced-based research, best practices and make recommendations for vision screening of children.

Activities

- 11/29/2017 Food and Nutrition/Behavioral Health over the Holidays Call through Adobe Connect with Health and Social Services Recovery Texas- with US Department of Health and Human Services
- 1/12-13/2017 - Conference Planning and Executive Committee meeting
- 1/9/2019 Phone conversation with C.J. Huff, Ed.D., Contract Support for the HHS Recovery Division, U.S. Dept. of Health and Human Services, Assistant Secretary for Preparedness and Response

Send Out:

Even now, 4 ½ months after Harvey, the CDC is working with the US Department of Health and Human Services to determine what we as school nurses are seeing as a need in the area of Air Quality after a disaster.

This is a great opportunity to give input at a national level. Please feel free to share with your colleagues who are not TSNO members. They can email their responses to lsicilio.tsno@gmail.com

Are you seeing (or did you see) an increase in respiratory related illness such as asthma, colds, bronchitis, etc.?

Would you like to see webinars or other types of resources to support you regarding sources of problems for air quality?

Would you like to see webinars or other types of resources to support you regarding health conditions caused by poor air quality?

- 2/20/2018– Letter to Governor Abbott for School Nurse Day Proclamation
- 2/22/2018 *A New Year, A New Commitment to Online Communities and Websites* - NASN Webinar
- 3/20-21/2018 American Academy of Pediatrics, Campaign for Dental Health annual meeting (Itasca, IL) (see report p. 4-5)

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- 3/23/2018 – Conference Planning and Executive Committee meeting
- 3/23-24/2018 – TSNO *Leadership Academy* in Dallas/ Plano
- 4/16-17/2018 - The Texas Campaign to Prevent Teen Pregnancy Annual Symposium, Austin, TX (see report p. 6-8)
- 4/20/2018 TASB Special Education Members' Conference SHARS Practitioner Panel (Round Rock, TX) (see report p. 9-10)
- NASN "Webinar #4: 2018 Affiliate Needs Assessment Findings"
- 5/3-4/2018 - Conference Planning and Executive Committee meeting
- 6/7/2018- Speaker at Baylor Scott & White *School Nursing Scope & Standards: Practice with Purpose*
- Texas School Nurse Administrators Association 2018 Conference, June 10-12, 2018 South Padre
- 6/29-7/3/2018- Attend NASN Pre-conference Leadership and Annual Conference San Diego
- 7/25/2018 Belle Blackwell Conference at Wisdom High School
- 7/25-27/2018 Texas Oral Health Conference Austin (see report p. 11-13)
- 9/11/2018 NASN Webinar *Data Collection Changes: Membership Applications and More*
- 10/25-26/2018 Represent TSNO Healthier Texas Summit Austin, TX
- Chaired face-to-face Executive Committee Meetings on 1/13/18, 3/23/18, 5/4/18, 11/8/18
- Respond to calls and sent emails to TSNO Board Members and membership.
- Work closely with **Kevin Stewart**, Political Consultant, Author, *Texas Legislative Law Handbook* www.TXLegeLaw.com to develop legislative priorities and develop bills
- Work closely with Dallas Plano Marriott Meeting & Event Manager for January EC/CP, March EC, May EC/CP
- TSNO Strategic Plan- review and update
- TSNO Mission and Vision updated
- Established Core Values

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American Academy of Pediatrics Campaign for Dental Health, March 20-21, 2018

Notes on Current Water Fluoridation Practices

Lisa MEd, BSN, RN, NCSN

Public health has conducted fluoridation research for more than 70 years, using data to promote and protect the health of people and the communities where they live, learn, work and play. (ADA, 2018) Water fluoridation is more effective than other forms of fluoride delivery and has been responsible for significantly improving the public's oral health status.

The U.S. Department of Health and Human Services (HHS) recommended the concentration for fluoride in the water in the United States at 0.7 ppm in 2015 after reviewing the best available evidence-based scientific information. Community water fluoridation is the controlled adjustment of the natural fluoride concentration and has consistently shown to reduce tooth decay while minimizing dental fluorosis. (U.S. Department of Public Health Services Federal Panel on Community Water Fluoridation, 2015)

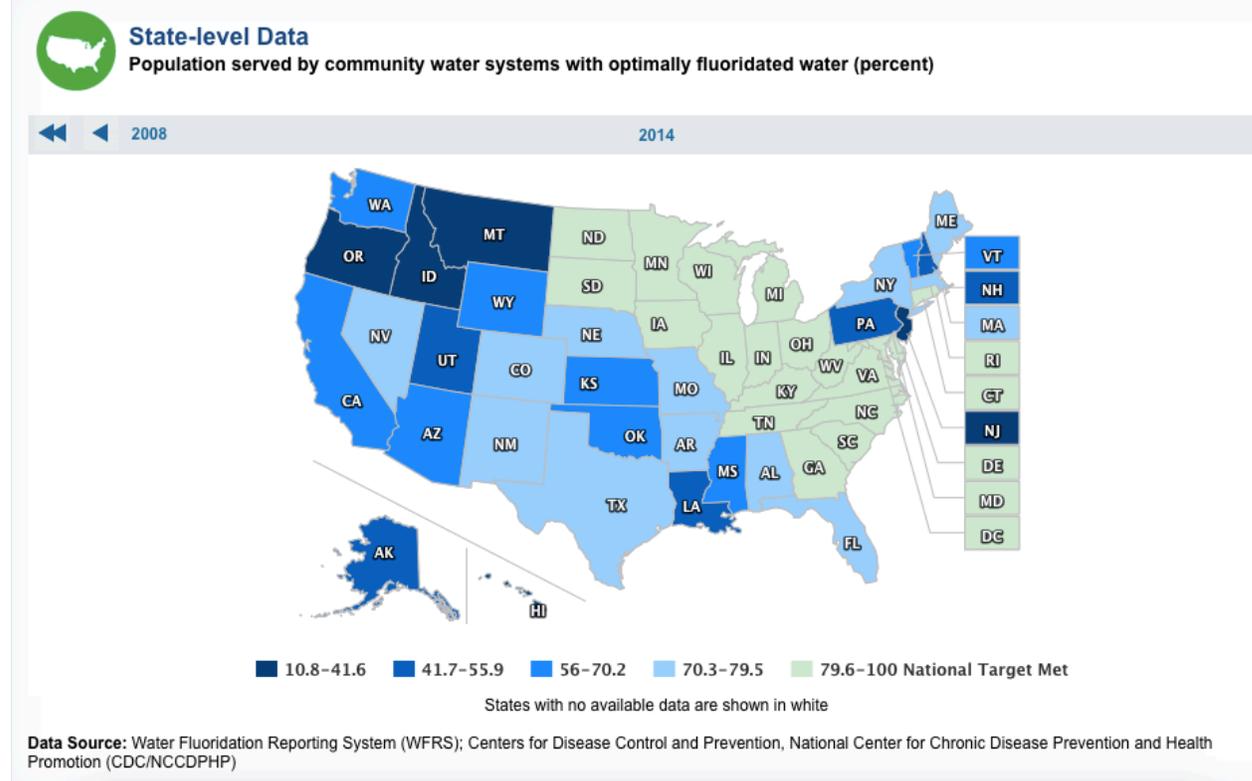
Today, prevention is a priority focus for oral health. The U.S. Department of Health and Human Services established Healthy People 2020 which provides a science-based, comprehensive set of challenging, yet doable, ten-year objectives for improving the health of our country. Oral Health Objective 13 seeks a 10% increase of the U.S. population served by community water systems from the reported 2008 data of 72.4% to a target of 79.6% for those who should be receiving the benefits of optimally fluoridated water by 2020. (Healthy People 2020, 2010) The CDC data indicates that, in 2014, a total of 211.4 million people or 74.4% of the U.S. population on public water systems, had access to fluoridated water. (CDC, 2016)

Improving dental and oral health for all communities by providing access to community water fluoridation will take a collaborative effort with many stakeholders, including school nurses, if we are to meet the Health People 2020 objectives for oral health. In order to become a more effective advocate, start by learning more about the fluoride level in your water. (CDC, 2018)

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(Healthy People 2020, 2014)

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- U.S. Department of Public Health Services Federal Panel on Community Water Fluoridation. (2015). U.S. Public Health Service Recommendation for Fluoride Concentration in Drinking Water for the Prevention of Dental Caries. *Public Health Reports*, 318-331.

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Texas Campaign to Prevent Pregnancy 7th Annual Symposium

April 16-17, 2018 (Notes Lisa Sicilio, TSNO President)

A change in an ACE trauma score from 0-4 can dramatically change your health and risk factors.

Dr. Robert Anda said that “If it is predictable, it is changeable”.

A loss of education correlates to increased teenage pregnancies.

All students, regardless of ACE score, can benefit from resilience skills.

Relationship IS evidence-based practice.

Brave is having or showing mental or moral strength to face danger, fear, or difficulty

When life puts you in tough situations, don’t say Why Me? Say Try Me.

Courage is about heart

Gen Z is all about them and relationship

Dr. Brene Brown

Gifts of Imperfection- Be YOU

Daring Greatly - Be ALL In (realizing we will fail at times)

Rising Strong - Fall. Get up. Try again.

Braving the Wilderness - Courage to stand alone. True Belonging.

I Shall Not be Moved ~ Maya Angelou

Whole Hearted Living

Vulnerability is the birthplace

You can choose comfort, or you can choose courage, but you cannot have both. ~Brene

Brown

Guilt translates as I DID something bad

Shame translates as I AM bad.

A conversation about ACES must always include Resilience

NEAR Science

Neuroscience

Epigenetics

Adverse Childhood Experiences

Resilience

<https://thrivewa.org/nearhome-toolkit-guided-process-talk-trauma-resilience-home-visiting/>

Behavioral Risk Factor Surveillance

- Support
 - Social Emotional Competence Building
 - Hope and a sense of future
- Help
 - Concrete supports (not social media support)
- Community Reciprocity

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- Primary network of protection in your community
- People you see everyday
- Social Bridging
 - Asking for help
 - Trusting systems and people outside your circle to respond and be safe

Children's Resilience Initiative

www.resiliencetrumpsaces.org

Be a FORSE in your community

Focus On Resilience & Social- Emotional

What's Trauma Got to DO with It?

Turn knowledge into action

Use of PolleEV.com (great tool) in a conference

www.integrationsolutions.org

ACES Adverse Childhood Experiences

Trauma Informed- consider SOURCE of behavior

Health begins with HOPE

Make it personal, use eye contact

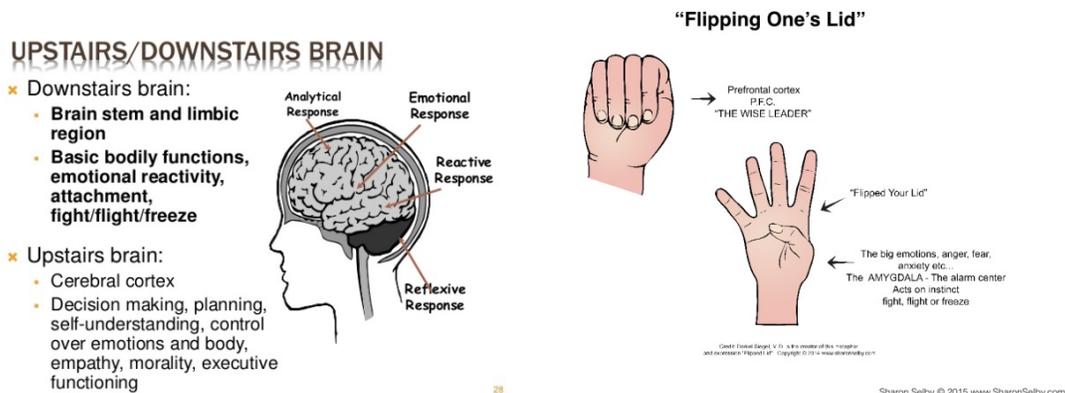
1. Self-regulation
2. Self-identity
3. Co-regulation

The STORY I'm telling myself... might not be actual reality

We make 47,000 decisions a day.

What is it that make one of those a trigger?

*Handy Model Dr. Siegel Minding the brain.



Sometimes admitting that you don't know is okay can help you connect- focus on the person

We need to be building missing skills, not shaming for lack of skills.

Empathy fuels connection, feeling WITH people. Empathy never starts with the words "At least"

Sympathy fuels disconnection. Shame cannot survive if spoken out loud.

Resilience Building Blocks Adult Focused Deck of Cards & Handbook

<https://resiliencetrumpsaces.org/>

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Acknowledging the legal rights of teens

Title X is a federally funded grant program dedicated solely to comprehensive family planning since 1970. Title X of the Public Health Services Act is a critical component of the nation's public health infrastructure. **It is the only federally funded program solely dedicated to providing reproductive healthcare to low income and uninsured women, men, and adolescents.** The Title X system is the entry point into the healthcare system for millions of Americans. Title X clinics are at the forefront of efforts to reduce rates of unintended pregnancy, HIV, sexually transmitted infections, and breast & cervical cancers.

Title X and Medicaid do not need parental consent for care

Any state funded program most likely will need parental consent for care.

Any pregnant teen under age 14 MUST be reported as abuse

Teens that can consent to ALL care:

- Emancipated
- Married
- Living apart from parent and financially independent
- Active duty

Healthy Texas Women

Healthy Texas Women is a program (through HHS) dedicated to offering women's health and family planning at no cost to eligible women in Texas. These services help women plan their families, whether it is to achieve, postpone, or prevent pregnancy. They also can have a positive effect on future pregnancy planning and general health.

Advancing Health Equity in Texas through Culturally Responsive Care

<http://www.txhealthsteps.com/121-advancing-health-equity-texas-through-culturally-responsive-care>

Process and Outcome in Development of Adolescent Self: Dealing with Anger, Drinking, Drugs and Premature Sex

The Rational Emotive Behavior Therapy Model (REBT) believes that people's beliefs strongly affect their emotional functioning. In particular certain irrational beliefs can make people feel depressed, anxious or angry and lead to self-defeating behaviors. REBT is a practical approach to assist individuals in coping with and overcoming adversity as well as achieving goals. REBT places a good deal of its focus on the present. REBT addresses attitudes, unhealthy emotions (e.g., unhealthy anger, depression, anxiety, guilt, etc.) and maladaptive behaviors (e.g., procrastination, addictive behaviors, aggression, unhealthy eating, sleep disturbance, etc.) that can negatively impact life satisfaction. REBT practitioners work closely with individuals, seeking to help identify their individual set of beliefs (attitudes, expectations and personal rules) that frequently lead to emotional distress.

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April 20, 2018

2018 TASB Special Education Solutions Members' Conference Provider Panel: This is How We Do It

National Association of School Workers (NASW) Texas, Texas Association of School Psychologists (TASP), Texas Occupational Therapy Association (TOTA), Texas School Nurses Organization (TSNO), Texas Speech-Language-Hearing Association (TSHA)

1. One of the other areas that TASB serves school districts is in the area of advocacy. From the audience's standpoint, they stay in the loop of SHARS in reference to Medicaid funding. Can you provide a summary of your association's advocacy agenda?
Mission: To **enhance whole student wellness and learning** by advancing school nursing practice. Vision: **Student access to health and learning**. All day. Every day.
Our current legislative priorities include:
 - a. Allowing nurses, with a standing order from a physician, to stock albuterol inhalation for non-specific patient use
 - b. Adding school nurses to concussion oversight teams
 - c. Allowing nurses to begin the removal-from-play protocol when they suspect a concussion
 - d. Nurse in every school (funded by the state)
 - e. Adding question about number of school nurses in yearly TEA survey
 - f. Adding a school nurse to the BON
2. This is a group of educators who support others like you. What are one or two ways that this group can support their providers?
 - a. A district must enroll as an active Medicaid provider for SHARS to become eligible to submit claims and receive reimbursement for SHARS Medicaid services.
 - b. Tech Support for an efficient documentation process. Paper documentation for SHARS places a burden on nurses to duplicate documentation- once in our Electronic Health Records and again on paper. Integrating an online documentation process with the billing service can greatly improve efficient and more accurate documentation
3. You are a panel of medical providers. What is the difference of a traditional setting and a school? What are the challenges?
 - a. School clinics do not bill students or their families for health services like a traditional medical home would do. We also do not see our students for a set appointment, but perhaps multiple times a day for brief periods for medications or procedures.
 - b. Documenting time increments accurately as required by the billing service can be challenging

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4. Sometimes providers are reluctant to document and/or bill for Medicaid. What advice can you give this room of educators of how to work in partnership with the providers who work in their district?
 - a. Each district needs a point person can act as a liaison between providers in the district and the billing service to generate and update current eligible student lists and training on documentation
 - b. The revenue generated is a crucial supplement to any district's budget with funds being utilized for additional staff, electronic health record systems, Special Education equipment and supplies, etc.
5. What resources or email distribution lists does your association offer that we can use to refer to or refer our providers to when they have questions?

Our website <http://www.txsno.org> has a "Contact Us" link which sends a direct message to our Executive Committee

July 25-27, 2018

Texas Oral Health Coalition Conference, Austin

(Summary of attendance- Lisa Sicilio TSNO President)

Grant writing strategies for funding and program development were shared by several organizations. They shared share information about grant writing, grant reviewing, and opportunities to submit a competitive application. The Texas Grant Resources at the University of Texas shared tips and tricks to prepare a thoughtful grant application that will be considered in today's restrictive funding climate.

Working to Fill the Dental Gap through Dental-Medical Collaboration with Patty Braun MD, MPH, FAAP, Professor of Pediatrics, Family Medicine, Public Health and Dental Medicine at the University of Colorado where she conducts oral health disparity and health services research and program evaluation at the Adult and Children's Consortium for Research and Dissemination Science.

- [MORE Care \(Medical Oral Expanded Care\)](#) is an initiative of the DentaQuest Institute (DQI) with an aim of providing primary and secondary preventive oral health services in primary care medical offices to underserved populations, as well as testing optimal patient-centered referral systems between primary care and dental care teams.
- Make oral health care a part of routine schedule.
- [The Center for Connected Health Policy](#) is dedicated to integrating telehealth virtual technologies into the health care system through advancing sound policy based on objective research and informed practices. Find to Telehealth policies in all 50 states.

Data Driven Decision-Making Panel to emphasize data that is collected in Texas can be used to impact both practice and policy. Current research presented that outlines issues related to the provision of oral health care. The role of the dental professional in the

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changing practice landscape, both in the prevention of HPV and in the use of data to promote risk-based accountability for oral health care for children.

- Data should be used to drive patient care and policy. Shortfalls of data include insufficient data, the need and ability to convert data into meaningful information.
- Repository of Oral Health Data for Evaluation and Outcomes ROHDEO explore state and county health data.
- HPV and Role of Oral Health Providers- Parents comment that if provider recommended the HPV vaccine they would get it. Dental Providers should educate their patients and parents about HPV vaccine to prevent oropharyngeal cancers.

Leveraging Prevention, Treatment, and Recovery Strategies to Address the Opioid Crisis - Commander Karen Hearod, MSW, LCSW

[Substance Abuse & Mental Health Services Administration](#) One of SAMHSA's core missions is to provide practitioners, policy makers, and consumers with current behavioral health data and analyses.

- To help fulfill that mission, SAMHSA conducts surveys on:
 - Drug and alcohol use, and mental illness demographics in the United States.
 - Mental health and substance use treatment sites.
 - Various behavioral health factors, such as drug-related hospital emergency room visits.
- Improving access to Rx and Recovery. Grants target a wide range of evidence-based activities designed to increase access to treatment for everyone who needs it.
- [Opioid Overdose Prevention Toolkit](#)
- [Find Help Locator at SAMHSA](#)
- [Screening, Brief Intervention, and Referral to Treatment \(SBIRT\)](#) is an evidence-based practice used to identify, reduce, and prevent problematic use, abuse, and dependence on alcohol and illicit drugs. An early intervention strategy.

Texas Substance Misuse Prevention Activities Panel Discussion Marc Fleming, PhD, MPH, R.Ph., Jessica Cance, MPH, PhD, Kasey Strey, ACPS, Linda Yazdanshenas and Mark LittleStar, DDS

- An overview of the opioid crisis nationally and in Texas
- DSHS [Outreach, Screening, Assessment and Referral Centers \(OSARs\)](#) may be the first point of contact for those seeking substance use disorder treatment services
- An overview of Prescription Monitoring Program was given.
- A review of the evidence regarding the alternatives to acute dental pain management regarding non-opioid analgesics. In addition, the standard protocol used at UT Dentistry, San Antonio, was presented.

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Community Water Fluoridation: What the evidence shows - Johnny Johnson, DMD, MS

The safety and efficacy of [community water fluoridation](#) (CWF) was examined. What the evidence shows- the discovery of fluoride in water and the dental health benefits, how fluoride in drinking water fights dental cavities and why the CDC named community water fluoridation as one of 10 great [public health achievements](#) of the 20th century and is still necessary to fight an infectious and transmissible disease.

1. What led to the discovery of fluoride in reducing dental cavities
2. How fluoridation began and what the research shows comparing fluoridated cities to non-fluoridated cities, and
3. How fluoride works to reduce dental cavities and why brushing with fluoridated toothpaste isn't enough
4. [Fluoridation Facts](#)
5. [American Fluoridation Society](#) wealth of resources and information

Health Messaging and Communications - Jessica Hughes Wagner, MPH, MCHES

- Direct the “Rider” (Rational ~10% part)
 - Education
 - Specific Call to Action
- Motivate the “Elephant” (Emotional ~90%)
 - Appeal to emotion
 - “Norm” the healthy behavior
 - Persuasion is about the receiver
 - Storytelling is about connection
- Shape the Path
 - “Nudged” to make healthy choice (Make the healthy choice easier!)
 - Build the environment
 - Policy
- Health Communication Program Cycle (very similar to the Nursing Process)
- What is the single MOST important word or phrase?
- *Designing Effective Health Messages* by Mackert, Lazard, Love