

# School Nurse UPDATE



#7 February 19, 2026

## FEATURED STORIES

[PRACTICE POINTS – Act Like a Nurse Speak Like and Educator](#)

[New DPI Resources \(DPI News\)](#)

[WASN Conference Registration Open \(p.6\)](#)

[SN Workforce Survey \(p.7\)](#)

## SAVE THE DATES

DPI Consultant Office  
hours 2/24/26 3-3:45  
PM; 3/20/26 9-9:45 AM;  
3/24/26 3-3:45 PM

DiSH 3/18/26 3 -4 PM.

WASN Annual  
Conference April 27-29,  
2026, Madison

NASN2026 in Las Vegas,  
June 29–July 2, 2026.

## Greetings!

February is American Heart Month. I came across three videos from SaveStation that you might want to check out. [CPR in Action-A 3D Look Inside the Body](#), [Recognize Sudden Cardiac Arrest in Athletes](#), [Automated External Defibrillator \(AED\) in Action- A 3D Look Inside the Body](#). Information on how to register your AED(s) location(s) on page 14.

**Congratulations to School Nurse Sue Richards recipient of the Project Adam Karen Smith Award (p. 11)!**

There are not many opportunities to learn how to **perform hearing screenings**. See information on **two free webinars** for various age groups (p.16-17). The Medical College of Wisconsin is specifically inviting school nurses to attend **their free Psychological First Aid training** (p. 20).

DPI is revising our webpages and documents to meet accessibility standards. I suggest **if there is a document or resource you frequently use, that you download it**. Some documents, forms, or resources may be removed temporarily or permanently in the coming months.

I feel a responsibility to encourage Wisconsin School Nurses to practice to their full scope and use best practices. Doing so requires ongoing professional development and researching best practices. **The documents DPI produces contain best practices**. This newsletter shares **current issues in school health**. PRACTICE POINTS contains information to **help school nurses leverage their knowledge of the educational system and their health expertise to address chronic health conditions**. Students need school nurses to be present in schools. If that is to occur school nurses need to demonstrate their skills in terms educators value.

*Louise*

# DPI News

## **New DPI School Health Resources**

Two new chapters of the School Nurse Handbook are published on the [DPI Resources and Publications webpage](#). These include [Chapter 7: Care of Students with Acute Illness and Injury](#) and [Chapter 9: Emergency Response and Crisis Preparedness](#).

Also, on the Resources and Publications webpage is a new dropdown box with Mental Health Resources for School Nurses. The Wisconsin Department of Health Services (DHS) is working to create a mental health toolkit specific for Wisconsin school nurses. Once completed the link will be posted under this section.

## **New Resource for Supporting Pediatric Feeding Disorders in Wisconsin Schools**

Wisconsin DPI is pleased to introduce a Resource for Supporting Pediatric Feeding Disorders in Schools. This resource provides information related to Pediatric Feeding Disorder (PFD) and how to support students with feeding and swallowing needs in the school setting. The resource offers a step-by-step approach to facilitate student participation in safe feeding and swallowing in schools.

- [Resource for Supporting Pediatric Feeding Disorders in Wisconsin Schools](#)

A webinar was held on January 28th to introduce the resource, and that video recording and slide deck can be found on the [Specific Language Impairment \(SLI\) Hot Topics](#) webpage and in the link below. The monthly webinar series held during the 2024-2025 school year on PFD is contained in the link as well.

- [Pediatric Feeding Disorders Series Video Links](#)

## **Related Services and the Individualized Education Program (IEP)**

A recently published resource is available outlining what related services are, tips for IEP teams on how to make related services decisions, examples of who and where related services can be provided and so much more. The [Related Services](#) resource is a great tool for guiding teams in making data-based decisions about a student's related service needs and facilitating discussion among staff and parents about what related services are, who provides them, and where they can be provided. It also includes an appendix defining common types of related services, how those services are provided, and license requirements. This resource can be found on the [Special Education Related Services webpage](#). The resource could be used to compliment [Bulletin 10.07: Describing Special Education, Related Services, Supplementary Aids and Services, and Program Modifications and Supports](#) which provides additional information on documenting special education services in the IEP.



*The Related Services resource is a great tool for guiding teams in making data-based decisions about a student's related service needs and facilitating discussion among staff and parents about what related services are, who provides them, and where they can be provided.*

# DPI News



## **Special Education Bulletins Available in Spanish**

DPI recently translated several special education bulletins into Spanish. These can be found on the DPI [Special Education Bulletins webpage](#). They have also been added to the DPI [Spanish language special education topics webpage](#) that contain a wide variety of DPI resources in Spanish.

## **IEP Team Resource for Deafblind Special Factor Considerations**

DPI recently released a new resource for IEP teams to assist in the discussion of special factors when a student is deafblind. [Click to view Guidelines for Discussion on Consideration of Special Factors when a Student is Deafblind](#). This resource can be found on the DPI [Guidance for Implementing Wisconsin Deafblind Disability Category Criteria webpage](#).

## **Resource Reminder: Wisconsin Wayfinder**

Do you have families seeking additional resources for their child with a disability in your community or through statewide services? The Wisconsin DHS created the [Wisconsin Wayfinder: Children's Resource Network](#). Wisconsin Wayfinder supports families of children with delays, disabilities, special health care needs, and mental health conditions. Children's resource guides are helpers who assist families, caregivers, professionals, and organizations in finding a wide array of supports and services available through the Children's Resource Network. Their services are free and confidential. Considering sharing this resource through IEP team meetings, school and district webpages, and through consultation for families seeking additional support.

## **Resource Reminder: Providing Language Assistance to Families**

Wisconsin DPI receives inquiries and public comment related to requirements for language interpretation at IEP team meetings and translation of documents such as a student's IEP. In addition, questions arise related to support that may be required when a parent has a communications-related disability. The following resource provides information on requirements for those parents that may require language assistance: [Providing Language Assistance to Parents](#). This resource is also available in Spanish: [Asistencia a los Padres con el Idioma](#). In addition, DPI partners with Wisconsin FACETS to provide training for home language interpreters with both virtual and in-person trainings coming up in February and March. For more information, please visit the [WI FACETS Training for Home Language Interpreters page](#).

*DPI recently released a new resource for IEP teams to assist in the discussion of special factors when a student is deafblind.*

# DPI Partners

## **Grooming and Online Enticement: Red Flags and Safety Tips for Parents**

[This resource](#) from the Wisconsin Department of Justice provides important information for parents on Harmless Apps vs. Dangerous Apps, definition and signs of grooming, online enticement, common tactic to entice children, and sextortion.

## **Circles of Life Conference**

May 14-15, 2026, Holiday Inn Stevens Point Convention Center

Presented by Family Voices of Wisconsin, the Circles of Life Conference is for families who have children with disabilities and the professionals who support them. This conference includes keynote speakers, multiple sessions, activities for children with supervised sessions for youth ages 10 to 18, family fun night, and more. For information and registration visit the [Circles of Life Conference webpage](#).

## **Wisconsin Family Ties Seeks Board of Directors**

Wisconsin Family Ties warmly invites individuals who care deeply about families and systems of care to consider joining our Board of Directors. Serving on our board is a meaningful opportunity to help guide our organization, strengthen our impact, and advance our mission to support children, youth, and families across Wisconsin.

Individuals who have **experience serving on a nonprofit or organizational Board of Directors** and who enjoy contributing their leadership, insight, and strategic perspective are encouraged to connect. We value diverse lived and professional experiences, a commitment to family-driven care, and a shared passion for making a positive difference. Candidates with **lived experience raising a child with social, emotional, behavioral, developmental, or mental health challenges** are preferred.

If this opportunity speaks to you—or if you know someone who may be a great fit—we would love to start a conversation. Interested individuals are encouraged to email [board@wifamilyties.org](mailto:board@wifamilyties.org) to learn more or express interest.

## **Free Documentary Screening and Discussion**

A partnership team with representation from DPI and Milwaukee Public Schools (MPS) will be hosting a free virtual screening of the documentary film, *It Happens Here*, made in Wisconsin with real individuals who survived a trafficking experience as youth. The film is 35 minutes long and with discussion following. This is a basic level introduction to trafficking. It's free! Join us.

When: Tuesday, February 24, 3-4pm

Intended Audience: School Staff, community partners, and parents/caregivers are welcome to join us for a free screening and discussion of the documentary!

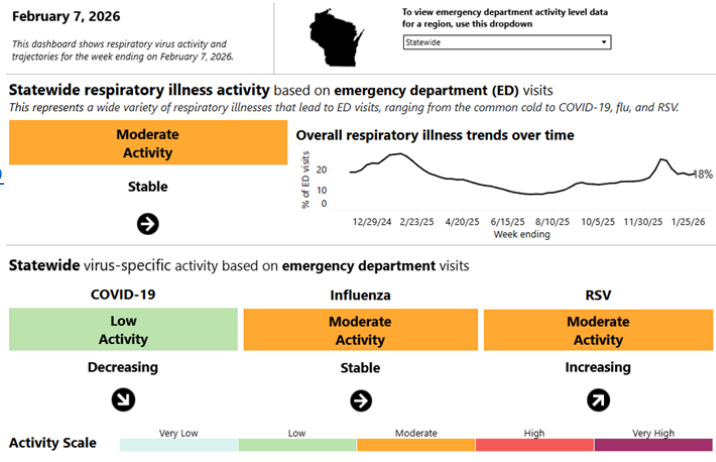
Facilitators: Julie Incitti, DPI School Social Work Consultant, and Jessica Goodman Schutz, MPS School Social Worker

About: The Department of Children and Families (DCF) has created a documentary that tells the true stories of sex trafficking in Wisconsin and conveys how easy it is to be drawn into the life. This project is part of a statewide effort to inform youth and adults about the risk factors and warning signs of trafficking and what they can do to assist individuals who may be at risk of, or affected by, trafficking.

[Registration](#)

# DHS News

The Wisconsin Department of Health Services' [respiratory illness web](#) provides a summary of data reported on outpatient and urgent care health care visits for illnesses defined as influenza-like illnesses (ILI). Data are available starting in the 2019–2020 influenza season and are displayed by [Wisconsin public health region](#). These data come from the [Influenza-like Illness Surveillance Network \(ILINet\)](#).



## Additional respiratory virus data

To view more respiratory virus data, visit:

- [Emergency department data](#)
- [Laboratory testing data](#)
- [Death data](#)
- [Hospitalization data](#)
- [Outpatient influenza-like illness data](#)

## New data visualization

DHS has published a new influenza subtyping data visualization on the [Laboratory Testing Data](#) webpage. The Wisconsin Public Health Laboratories data visualization displays the relative proportion of seasonal influenza A subtypes identified by public health laboratories in Wisconsin throughout the respiratory illness season.



## Wisconsin Seal-A-Smile (SAS) is looking for feedback

SAS is a school-based dental sealant program developed to prevent oral disease in Wisconsin's students. SAS is comprised of 26 individual programs across the state and served more than 87,000 students in over 1,100 schools during the 2024-2025 school year.

Please consider completing [this survey](#). It is intended for both schools that participate with a SAS program and non-participating schools and school districts. The information provided will help Wisconsin SAS identify opportunities to better serve schools, staff, and students.

We look forward to seeing you at the Wisconsin Association of School Nurses conference this April!

# WASN

## REGISTRATION for the 2026 Wisconsin School Nurses Association (WASN) CONFERENCE is OPEN!

Early bird registration available until 3/20/26.

Check out the conference schedule for a list of this year's sessions and presenters.

Lodging information to be available soon on [the conference webpage](#).

Lots of networking opportunities available to meet other school nurses and catch up with colleagues you see at the conference each year

[REGISTER HERE](#)

Reach out with questions to [megan@wisconsinnurses.org](mailto:megan@wisconsinnurses.org)!

### WASN Accepting Nominations for School Nurse and School Nurse Administrator of the Year Awards

The nomination period for the 2026 Kathryn Etter School Nurse of the Year and School Nurse Administrator of the Year awards is still open!

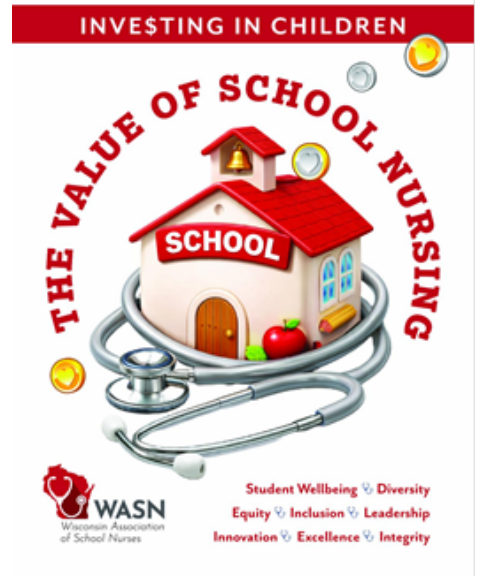
This is a wonderful opportunity to recognize the exceptional contributions of the professionals in your district who go above and beyond to support student health and well-being. We encourage you to take a moment to reflect on your colleagues' dedication and nominate a deserving candidate by **February 28, 2026**.

#### Nomination Categories & Eligibility

To ensure your nominee is recognized in the correct category, please review the criteria below.

**Note:** If a nominee's primary role is administrative rather than direct care, please ensure they are submitted for the Administrator award to ensure their qualification is processed correct.

Criteria	Kathryn Etter School Nurse of the Year	School Nurse Administrator of the Year
Membership	Must be a Registered Nurse & current WASN member.	Must be a Registered Nurse & current WASN member.
Primary Role	Direct student care / practicing full-time school nurse.	Supervision, administration, and coordination of health programs.
Experience	Currently practicing full-time.	At least one year of experience in school health.
Board Status	Current WASN Board members are eligible.	Current WASN Board members are eligible.
Where to Nominate	<a href="#">Nominate Here</a>	<a href="#">Nominate Here</a>



# NASN News



## **Plan for NASN2026—Stronger Together in Las Vegas**

NASN2026 is more than a conference—it’s an investment in your leadership, your practice, and your entire school community. Our Conference Justification Toolkit equips you with compelling reasons to attend June 29–July 2, 2026, at Caesars Palace in Las Vegas, Nevada, along with an editable template letter to help you clearly communicate the value of your attendance to administrators or employers. Registration, the room block, and the NASN2026 website will open later this month.

## **Using a Multi-Tiered System of Support to Address Chronic Absenteeism in Students with Chronic Health Conditions**

This [recently published article](#) outlines the role of school nurses in addressing chronic absenteeism in students with chronic health conditions.

## **School Nurse Workforce Study Needs Your Participation! You are invited to participate in the 2025 National School Nurse Workforce Study Survey!**

The National Association of School Nurses (NASN) is conducting the 2025 National School Nurse Workforce Study Survey to collect data on school nurse education, credentialing, team support, and workforce experiences. The goal of the data is to **advocate for greater support, visibility, and resources for school nurses.**

**Time commitment:** Up to 30 minutes

**Eligibility:** Have an active nursing license, provide school nursing services in a school setting.

[Request the survey here](#)

Or copy and paste the URL below into your internet browser:

[https://nasn.qualtrics.com/jfe/form/SV\\_9Gon6lhAZJAhAzA](https://nasn.qualtrics.com/jfe/form/SV_9Gon6lhAZJAhAzA)

Survey results are:

- **Confidential and you will never be individually identified.**
- Results will only be reported at state, region, or national levels. You may voluntarily provide your ZIP code and select the school (or schools) where you work so we can determine how representative the survey is.

There are no direct benefits to you, but your responses will provide valuable insight into school nursing and will strengthen NASN’s ability to advocate for resources and support school nurses’ needs. The risks are minimal.

If you have questions about this study, please contact Alexandria Albers ([aalbers@nasn.org](mailto:aalbers@nasn.org)).

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# Attendance Works

## Reduce Unnecessary Health-Related Absences

Absences can quickly add up. Helping families manage chronic conditions and understand when to send a child to school or keep her home can empower families.

Students with a chronic health issue or those dealing with a developmental disability may need specific supports. Families, caregivers, schools and health-care providers can support students with chronic health issues so they can attend regularly.

- Managing chronic health issues at school: for families (Chinese, Spanish, Tagalog, Vietnamese)
- Managing chronic health issues at school: for educators

Families often don't understand when their child is too sick for school, and when they can safely send them in. These resources provide some clarity.

- When is sick too sick for school? (Chinese, Spanish, Tagalog, Vietnamese)
- Health guidance for going to school (Spanish)

There is much districts and schools can do to prevent unnecessary health-related absences. These handouts offer families, educators and community members tips on how to keep all students healthy and learning.

- Keep your child healthy and in school! (Spanish)
- Keep students healthy and in school!

Occasional absences related to health reasons are to be expected. When illness-related absences begin to add up, you can bring it to the attention of others, such as the family outreach or health staff members.

[Download new health handouts](#)

*\*I note this request on the Attendance Works webpage. Please use this guidance as it is written. Be advised that we are not currently allowing changes to these handouts, including wording changes and adding logos.*

*However, these handouts are not meant to take the place of local health department or school district guidance. Prior to distributing, please confirm with your district and/or local health department to make sure that the content doesn't conflict with local or state health department guidance.*

## Managing chronic health issues at school: for educators



Chronic health issues like asthma, diabetes or allergies, and developmental disabilities such as ADHD or autism, are leading contributors to missed school days. It's important that schools and districts partner with families and health-care providers to help children with chronic health conditions stay healthy and in school.



### FOR DISTRICTS

- Ensure **district protocols support a healthy environment** for all students.
- Download **Fast Student Disability and Access** for examples of interventions.
- **Establish a health team** (social workers, school nurses, administrators)
- **Provide professional learning opportunities** to district and school staff about how best to support students with chronic health issues.
- **Raise awareness** among all students, families and staff about existing health-related supports and resources.
- Ensure **adequate numbers of school health staff** across buildings.
- **Develop partnerships** with health-care providers to improve access to care including telemedicine, in-district clinic and dental care.
- **Share attendance data** with school health staff and with local health-care providers.
- Explore opportunities to **provide school health staff with read only access** to outside student health records, allowing for improved coordination of care.



### FOR SCHOOLS

- Support families in **completing health-related forms**, including forms allowing students to receive medications.
- Offer **guidance on when a child should or shouldn't stay home** for health-related reasons.
- For prolonged absences, **co-create a Return to Learn plan** with families for during and after the absence with options for gradual return and completing work remotely.
- **Review with relevant staff all health-related information** for individual students.

For more information visit [attendance.works.org/resources](https://attendance.works.org/resources)

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# Diabetes in School Health (DiSH)

## Upcoming DiSH Sessions

Sessions are held on the 3rd Wednesday of the month, from 3-4 PM, CST.

March 18, 2026

Diabetes Technology

April 15, 2026

Innovation to Immunotherapy: Hope for What's to Come in Diabetes Care

May 20, 2026

Diabetes Emergencies

# Office of Children's Mental Health

## The Protective Power of Native American Culture

The Wisconsin Office of Children's Mental Health (OCMH) is detailing the power that Native culture has in protecting youth mental health. In the [Culture is Prevention](#) Data Bite, OCMH shares research showing that Native culture has a strong preventive effect on mental health. That is, Native children with a positive connection to their Native culture benefit with a lower risk of suicide, depression, and substance abuse.

Research also points to several actions we can take to support Native youth. Communities, schools, policymakers, health leaders, and providers alike can promote traditional cultural practices like talking circles, drumming, ceremonies, as well as indigenous arts and crafts. Investments in language revitalization and outdoor experiences for Native youth are also beneficial to their well-being.

"There are a number of actions – big and small – that we can take to support our Native communities. Understanding the power of strong family bonds, spiritual connections, and cultural practices is a start," says Linda Hall, director of OCMH. "For Native American youth, understanding that this power comes from their own culture and already exists within Native communities is equally important."

Hall says, "Though many Native children face poverty, intergenerational trauma, and live in under-resourced communities, our office will continue to highlight the strengths of these young people as we work to build youth belonging and more hopeful futures for all children in Wisconsin."

See [OCMH Data Bites](#)

See [OCMH Youth Belonging](#)

## Middle School Mental Health

The Office of Children's Mental Health recently posted a new informational flyer on Middle School Mental health. [Link to flyer.](#)

# The Wisconsin Safe & Healthy Schools Center

*The Wisconsin Safe & Healthy Schools Center spring trainings are designed to provide timely resources, practical strategies, and opportunities for growth.*

**Sign up now to participate!** See our [website for a calendar view with registration links](#).

## **Request a Youth Mental Health First Aid (YMHFA) Training for your school or community!**

The DPI and the WISH Center can offer a limited number of YMHFA trainings at no cost to Wisconsin schools, organizations and communities. Funding is available for trainings scheduled through June 30, 2026. Complete the [YMHFA Training Request Form](#) to schedule your training

### **February 2026**

- **February 17 & 18 and March 10 & 11, 2026 - Compassion Resilience: Training of Facilitators (TOF)**, Online - Zoom, 9:00am-12:00pm, FREE, [Link to register](#)
- **February 19, 2026 - Addressing Youth Vaping and Best Practice Solutions**, Online - Zoom, 1:00pm-3:00pm, FREE, [Link to register](#), [Link to flyer](#)
- **February 24 & March 10, 2026 - Restorative Practices Community of Practice**, Online - Zoom, 8:30-10:00am, FREE, [Link to register](#), [Link to flyer](#)

### **March 2026**

- **March 3 & 4, 2026, Restorative Practices for Educators**, at CESA 4 in West Salem, 8:30am-3:00pm, [Link to register](#), [Link to flyer](#)
- **March 9, 2026, Best Practices for Substance Use Prevention & Intervention**, at CESA 2 in Whitewater, 9:00am-12:00pm, FREE, [Link to register](#), [Link to flyer](#)
- **March 11, 2026, Best Practices for Substance Use Prevention & Intervention**, Online - Zoom, 9:00am-12:00pm, FREE, [Link to register](#), [Link to flyer](#)
- **March 17, 2026, Got Drugs? Now What! - Investing in 'What Works' with Melissa Moore**, Online - Zoom, 9:00am-10:30am, FREE, [Link to register](#), [Link to flyer](#)

### **April 2026**

- **April 9, 2025 - Youth Mental Health First Aid with CESA 6**, Virtual, 9:00am-2:00pm, [Link to Registration](#), [Link to flyer](#)
- **April 13 & 14, 2026, Restorative Practices Formal Conferencing**, at CESA 1 in Pewaukee, 8:30am-3:00pm, [Link to register](#), [Link to flyer](#)
- **April 21 & May 12, 2026 - Substance Use Prevention & Intervention Community of Practice**, Online - Zoom, 9:00am - 10:30am, FREE, [Link to register](#), [Link to flyer](#)

# Wisconsin Asthma Coalition

## Dose of Oxygen Important Dates

2026 | Tentative Wisconsin Asthma Coalition (WAC) webinar dates

**March:** Asthma and Allergies

**May:** Celebrating Asthma Awareness Month

**July:** Educational Session hosted by GlaxoSmithKline

**September:** Asthma in Schools

**Late Fall:** Annual WAC Meeting

*\*Watch for dates, times and registration info in upcoming newsletters*



W I S C O N S I N  
**ASTHMA**  
C O A L I T I O N

★ Children's Health  
Alliance of Wisconsin

## Project ADAM

### Congrats Sue Richards!

The Project ADAM Karen Smith Award recipient for 2025 is Sue Richards of Edgewood High School of the Sacred Heart in Madison, WI. Sue was nominated by her colleague Mekel Wiederholt-Meier. Sue has demonstrated exceptional passion and dedication to the care and safety of our school community. Her commitment and leadership led to:

- Implementing vital safety protocols. Sue has ensured that all faculty, staff, and administrators are trained in CCPR, AED use, and Stop the Bleed procedures.
- She also established and provided professional training for our first Medical Emergency Response Team (MERT) to respond effectively to cardiac and other emergencies during the school day.
- Additionally, Sue successfully acquired four new AEDs—including one placed on our outdoor sports field—and ensured clear, visible signage for all rescue resources throughout the school.
- Another of Sue's significant achievements was founding the Health Occupations Students of America (HOSA) club at Edgewood High School. Through HOSA, students engaged in bi-weekly meetings with local first responders, learning firsthand the importance of emergency preparedness. Many of these students went on to receive first aid and emergency planning training, inspired by Sue's leadership and commitment to empowering the next generation."

Congratulations Susan! This award is being presented in honor and memory of Karen Smith. We look forward to celebrating with you as you accept recognition of this honor.

Project ADAM is seeking nominations of individuals for 2026 who have demonstrated passion, innovation, and excellence in serving as a champion for their school and/or community-based CPR-AED program. The Application period is open until December 31, 2026. Submit entries to:

[projectadamwi@childrenswi.org](mailto:projectadamwi@childrenswi.org)

# American Academy of Pediatrics

## **American Academy of Pediatric Issues Recommended Childhood and Adolescent Immunization Schedule for 2026**

The American Academy of Pediatrics has published the “Recommended Childhood and Adolescent Immunization Schedule: United States, 2026,” that continues to recommend routine immunization for protection against 18 diseases, including RSV, hepatitis A, hepatitis B, rotavirus, influenza, and meningococcal disease.

[A policy statement](#) describes the schedule, released on January 26, 2026, in AAP Red Book Online, the academy’s clinical guidebook for infectious diseases prevention and treatment. A parent-friendly immunization schedule is published on HealthyChildren.org.

Since its founding in 1930, the American Academy of Pediatrics has been a [leading voice in vaccine recommendations](#), creating evidence-based guidance to support pediatricians in caring for children and families.

“The AAP will continue to provide recommendations for immunizations that are rooted in science and are in the best interest of the health of infants, children and adolescents of this country,” AAP President Andrew Racine, MD, PhD, FAAP said. “Routine childhood immunizations are an important early step in the path to lifelong health. Every step you take alongside your child on that path is because you want them to grow up healthy and as a trusted partner on that journey, your pediatrician welcomes conversations about all your child’s health care, including immunizations.”

The 2026 AAP immunization schedule has been formally endorsed by 12 medical and healthcare organizations, including:

- American Academy of Family Physicians (AAFP)
- American College of Nurse Midwives (ACNM)
- American College of Obstetricians and Gynecologists (ACOG)
- American Medical Association (AMA)
- American Pharmacists Association (APhA)
- Council of Medical Specialty Societies (CMSS)
- Infectious Diseases Society of America (IDSA)
- National Association of Pediatric Nurse Practitioners (NAPNAP)
- National Medical Association (NMA)
- Pediatric Infectious Diseases Society (PIDS)
- Pediatric Pharmacy Association (PPA)
- Society for Adolescent Health and Medicine (SAHM)

The 2026 AAP recommendations remain largely unchanged from prior AAP guidance released in August, 2025, but they differ from a schedule recently issued by the Centers for Disease Control and Prevention. The AAP formerly partnered with the CDC to create a unified set of vaccine recommendations, but recent changes to the CDC immunization schedule depart from longstanding medical evidence and no longer offer the optimal way to prevent illnesses in children. By contrast, the AAP childhood and adolescent immunization schedules continue to recommend immunizations based on the specific disease risks and health care delivery in the United States.

Continued on next page.

# American Academy of Pediatrics

Continued from page 12

## **American Academy of Pediatric Issues Recommended Childhood and Adolescent Immunization Schedule for 2026**

The American Academy of Pediatrics has published the “Recommended Childhood and Adolescent  
“AAP recommends immunizations that have been designed to teach the immune system to recognize and resist serious diseases,” said Sean O’Leary, MD, MPH, FAAP, chair of the AAP Committee on Infectious Diseases. “They are carefully tested and monitored over time. The pacing and combination of vaccines are based on what we know about when your child’s immune system is ready to learn and respond best.”

The AAP recommendations are based on a well-established framework for evidence evaluation, review of vaccine safety data, the epidemiology of the diseases in the United States, the impact of the diseases and how the vaccines could prevent the diseases and their complications.

The AAP recommendations protect against diseases that include:

- **RSV (Respiratory Syncytial Virus)**, which is the leading cause of hospitalization for babies before their first birthday. It is a common virus that affects the lungs and airways. Immunizations for pregnant mothers and newborns provide antibodies that offer necessary protection.
- **Influenza**, or the flu vaccine, which is recommended for all children starting at six months old. This helps protect not only the child but also the community—especially during seasons when other viruses like RSV and COVID-19 are also circulating. Historically, over 80 percent of influenza-associated pediatric deaths have occurred in unvaccinated or incompletely vaccinated children. Children younger than 5 five years, especially those less than two years, are especially vulnerable to severe illness and hospitalizations or death due to influenza.
- **Hepatitis B**, a viral infection that attacks the liver and can cause both acute and chronic disease. Chronic infection over the course of a lifetime can lead to liver damage, liver failure, liver cancer, or even death. The hepatitis B vaccine has been tested extensively for safety and efficacy, and when administered within 24 hours of birth it is highly effective in preventing newborn infection.
- **Measles**, an extremely contagious disease whose complications can lead to pneumonia, encephalitis (swelling of the brain), deafness, intellectual disability, and even death. More than 2,200 cases, including three deaths, have been reported in outbreaks over the past year, with young children most likely to be affected.
- **Rotavirus, diphtheria, tetanus, whooping cough (pertussis), polio, pneumococcal disease, COVID, mumps, rubella, chickenpox (varicella), meningitis and hepatitis A** are other diseases that can be prevented by following the AAP recommendations for vaccines.

“For more than 60 years, millions of children and countless American communities have experienced the benefits of routine childhood vaccinations,” Dr. Racine said. “The AAP is working with our partners across medicine and public health to ensure that parents have credible, science-backed vaccine recommendations they can trust. If parents have questions about vaccines or anything else, your child’s pediatrician is there to help.”

# Miscellaneous



## Help Anyone Find An AED When Seconds Matter

Too often, nearby AEDs go unused during sudden cardiac arrest because no one knows where they are.

Registering an AED in the National Emergency AED Registry (NEAR) ensures its location is available to 911 dispatchers and emergency response apps during a cardiac emergency. AEDs are registered by submitting their location through the free PulsePoint AED app, helping ensure they can be identified and used when seconds matter.

### Take action:

1. [Download the PulsePoint AED app.](#)
2. Locate AEDs in schools, workplaces, or public spaces.
3. Snap a photo, confirm the location, and [upload it here.](#)
4. The information is automatically added to the national database.

## Getting READDY at School: Collaborating with School Nurses for Diabetes Transition Success

This UW Pediatric Grand Rounds of interest to school nurses has been posted at the sites below.

<https://healthtransitionwi.org/wisconsin-school-nurses/>

<https://www.pediatrics.wisc.edu/getting-ready-at-school-collaborating-with-school-nurses-for-diabetes-transition-success/>

Speakers: M. Tracy Bekx, MD, professor, Division of Endocrinology & Diabetes, Department of Pediatrics, UWSMMPH, Kari Weier, NP, nurse practitioner, Division of Endocrinology & Diabetes, Department of Pediatrics, UWSMMPH, Victoria Nicksic, MD, clinical instructor, Division of Endocrinology and Diabetes, Department of Pediatrics, UWSMMPH, Tim Markle, director, Health Transition Wisconsin, Gretchen Forbes, RN, nurse, Memorial High School, Madison Metropolitan School District, and Laurel Cornelius, nurse coach, Madison Metropolitan School District

## New Resources for School Nurses Added to Health Transition Wisconsin Website.

Health Transition Wisconsin offers tools, resources and trainings to help Wisconsin school nurses provide best practice (healthcare) transition care to their students with developmental disabilities or special health care needs. [Check out the website.](#)

*Health Transition Wisconsin offers tools, resources and trainings to help Wisconsin school nurses provide best practice (healthcare) transition care to their students with developmental disabilities or special health care needs.*

# Miscellaneous

## **Beats and Beyond-The Pulse (MacGill School Nurse Supplies)**

Between managing health office visits, emergency calls, and screening after screening, school nurses know every day has its plot twists. That's why we at MacGill love sharing stories that remind us how skill, compassion, and composure come together in incredible ways across our school communities. Valentine's Day may have come and gone, but with February being [Heart Month](#), this roundup is all heart—celebrating lifesaving moments, everyday courage, and the school nurses who keep their communities beating strong.

**Full-Court Heart:** It was an ordinary Tuesday afternoon basketball game at a school in New Jersey—the gym buzzed with the sounds of sneakers and shouts until, in an instant, everything changed. A 14-year-old student collapsed mid-game, unresponsive and pulseless. One moment, the school nurse was cheering from the stands; the next, she was on the gym floor, calm and focused, working alongside the coach to deliver life-saving CPR and AED care. A life saved because readiness met action - watch the story [HERE](#).

**Heart of Care:** After receiving a prestigious lifesaving award last month, a North Carolina school nurse reflected on the day back in September when training became reality. When a staff member collapsed in the front office, her immediate response—with help from colleagues and an AED—restored a heartbeat and hope. It's just another story among many that highlight the essential role of school nurses—steady, skilled, and ready for anything. Recognition like this is well-earned and deeply deserved. Read the full story [HERE](#).

**Heart on Call:** School nurses know—emergencies don't always happen between class bells. During a school meeting, a New York school nurse's swift action and CPR saved a parent experiencing a cardiac emergency. The district's recognition that followed is a testament to the life-saving difference school nurses make—on duty and beyond. Check out the school's post honoring her incredible actions [HERE](#).

**Curbside Heartbeat:** Not all emergencies happen within school walls, either. A school nurse in Utah was recently recognized for her quick, decisive response when a crossing guard collapsed outside the school last October. With an AED in hand, her care and composure helped save a life and highlight why every school needs a nurse on site. Read the heart-stopping details [HERE](#).

**Everyday Heart Work:** Finally, sometimes it's not a dramatic, code-blue moment—it's quiet, preventative work that changes everything. During school-based EKG screening events in Texas, nurse-led teams and community partners have uncovered hidden cardiac conditions in students, giving families a chance to act long before an emergency. Find out more [HERE](#). And it's happening elsewhere, too. Read this inspiring story from Illinois about how one of these school-based screenings identified a life-threatening heart condition in a student—and ultimately inspired her to pursue a nursing degree of her own - [HERE](#).

# Miscellaneous

## **Measles School Watch -The Pulse (MacGill School Nurse Supplies)**

Most days, the school health office is a revolving door of unpredictable, yet routine visits. But sometimes, history itself steps in—and this season, it’s wearing a rash and a fever of 104. With hundreds of measles cases already reported nationwide, school nurses are once again on the front line of an outbreak thought long defeated.

At least [588 measles](#) cases were reported in the United States in January, a striking number for a single month that signals active, accelerating transmission and raises immediate concerns for schools nationwide. Public health officials note that this surge follows a broader multi-year rise in measles activity, driven largely by pockets of under-vaccination and delayed childhood immunizations. This January figure is [particularly alarming](#) because it represents more cases in one month than the U.S. typically records in an entire year. The [epidemiologic profile](#) is especially troubling for schools across the country: roughly 93 percent of those infected so far this year are unvaccinated or have an unknown vaccination status, and about 85 percent of cases are occurring in children and teens 19 and younger.

While much of the country is busy debating halftime shows and highlight reels, the school health office is tracking a very different kind of high performer—and this one spreads faster than any wide receiver. By the time the classic rash comes into view, the most effective window for early containment has usually passed. The real work happens earlier, during the prodromal phase, when a high fever teams up with the familiar “[three Cs](#)”: cough, coryza, and conjunctivitis. For a careful clinician, spotting tiny, salt-grain-like lesions inside the cheek—[Koplik spots](#)—can serve as an early nudge that further evaluation and swift action are needed.

South Carolina has become one of the focal points of the current measles surge, with an outbreak centered around Spartanburg County climbing to [920 confirmed cases](#)—now the largest in recent U.S. history and surpassing last year’s record-setting Texas outbreak. State health officials have also confirmed cases of [measles encephalitis](#), a rare but severe complication with an estimated ten percent to 15 percent mortality rate in children, highlighting the critical need for swift clinical detection and response.

Managing measles shifts the health office from everyday clinic mode into full-scale prevention and outbreak command. Maintaining accurate immunization records, enforcing applicable vaccine requirements, keeping updated susceptibility lists, working closely with local and state health departments, and providing families with informed, [evidence-based information](#) on the safety and efficacy of vaccination against measles all become central to daily practice. [Research](#) and modeling consistently show that schools can be hotspots for measles transmission because of close contact and dense social networks. In that context, a well-prepared school health office is not just a support service—it is a key public health intervention point.

# Miscellaneous

## Hearing Screening Practices for Children Birth to School-Age Free Webinars

On February 24<sup>th</sup> the National Center for Hearing Assessment and Management (NCHAM) will be hosting a webinar "Building on Your Previous Experience and Training with Evidence-based Hearing Screening Practices for Children Birth - School-age."

February 24th, 2026, 1:00 p.m. - 2:30 p.m. CT [Register Here](#)

### Webinar Description:

Now that you have had some experience implementing evidence-based hearing screening practices, this is an opportunity to get some of your questions addressed by experts. Whether you are using Otoacoustic Emissions (OAE) hearing screening or Pure Tone Audiometry, you likely have questions and/or a need to review key points to ensure you are adhering to evidence-based practice guidelines.

Please join us for a webinar and question and answer session on improving the quality of hearing screening and evaluation practices.

### **Topics for this webinar include:**

- An overview of two hearing screening methods and available resources to support implementation.
- Otoacoustic Emissions (OAE) screening for all children.
- Pure Tone Audiometry screening for children three to five years of age and older.
- Techniques and strategies for managing children's behavior leading to the successful completion of hearing screenings.
- Equipment management scenarios that may arise when conducting hearing screenings.
- A review of the recommended follow-up protocol for when children do not pass the hearing screening.
- Strategies for communicating hearing screening results with family members and professionals with the goal of achieving appropriate following actions.
- A review of resources to support the development and sustainability of evidence-based hearing screening and follow-up practices.
- An opportunity to address questions related to OAE or Pure Tone Audiometry screening and follow-up practices.
- An opportunity to discuss ongoing training and technical assistance needs and resources.

Continued on next page.



*Whether you are using Otoacoustic Emissions (OAE) hearing screening or Pure Tone Audiometry, you likely have questions and/or a need to review key points to ensure you are adhering to evidence-based practice guidelines.*

# Miscellaneous

Continued from page 17

## **Target Audience:**

This webinar benefits individuals and programs serving children between birth through school-age who have some experience implementing either OAE or Pure Tone Audiometry hearing screening, including:

- Head Start, Early Head Start, Migrant and Seasonal Head Start, and American Indian and Alaska Native Head Start programs
- Part C early intervention programs
- Part B-619 programs
- Home visiting programs
- Preschool staff
- School Nurses
- Health care providers

You will receive a confirmation email with instructions for joining the webinar. This webinar will also be captioned, recorded, and posted on [kidshearing.org](https://kidshearing.org). If you are unavailable at the time this webinar is being offered, please register anyway so that after the webinar, we can email you the link allowing you to view the recorded video at your convenience.

## **On February 25th, NCHAM will be hosting a webinar: “Introduction to Evidence-based Hearing Screening Practices for Children Birth - School-age”.**

February 25th, 2026, 1:00 p.m. - 2:30 p.m. CT [Register Here](#)

## **Webinar Description:**

Each day, children with hearing loss attend early childhood programs and schools. It's important for staff to learn how to identify these children so they can receive the supports and services they need. Join us for a webinar on improving the quality of hearing screening and evaluation practices children of a variety of ages and abilities. Learn about useful facts and access practical tools to support the development and sustainability of high-quality hearing screening and follow-up methods in Head Start, Early Head Start, and other early care and education program settings.

## **Topics for this introductory webinar include:**

- How determining the status of children’s hearing ability relates to the overall goals of early childhood programs like Head Start, Part C early intervention, Part B-619 and other early care and education services.
- Current evidence-based practice recommendations for conducting hearing screening with children ages birth through school-age
- An overview of two screening methods and available resources to support implementation:
  - Otoacoustic Emissions (OAE) screening for all children
  - Pure Tone Audiometry Screening for children three to five years of age or older
  - Recommended follow-up protocol for when children do not pass the hearing screening
  - Information about equipment options and costs
- How to find:
  - A local audiologist to assist in program development, training, and diagnostic services
  - Other implementation resources and opportunities for training and technical assistance

Continued on page 19.

# Miscellaneous

Continued from page 18.

## **Target Audience:**

This webinar benefits individuals and programs serving children between birth and school-age, including:

- Head Start, Early Head Start, Migrant and Seasonal Head Start, and American Indian and Alaska Native Head Start programs
- Part C early intervention programs
- Part B-619 programs
- Home visiting programs
- Preschool staff
- School Nurses
- Health care providers

You will receive a confirmation email with instructions for joining the webinar. This webinar will also be captioned, recorded, and posted on [kidshearing.org](http://kidshearing.org). If you are unavailable at the time this webinar is being offered, please register anyway so that after the webinar, we can email you the link allowing you to view the recorded video at your convenience.

If you are new to implementing evidence-based hearing screening, join our introductory webinar [on February 24th](#).

New Asthma Funding Opportunity Asthma in Action: Creating Asthma-Friendly Communities  
The Wisconsin Asthma Program is issuing a request for applications to support asthma work in communities across Wisconsin. The goal is to improve health outcomes for people with asthma through more community partnerships and multi-component approaches to care.

Six to eight partners will be awarded \$5,000 to \$10,000 each to implement one or more Asthma Project Strategies, including:

School-based Asthma Self-Management Education  
Better Breathers Club  
Emergency department/Urgent Care Asthma Improvement Project  
Stock Asthma Medication  
Idle-Reduction Campaign  
Air Quality Flag Program  
Innovative Project

All partners are welcome to apply. This includes nonprofit organizations, schools, local and tribal health departments, health care organizations and faith-based groups.

Applications are due February 9. Please contact Cris Rameker with questions.

# Miscellaneous



## **Invitation from Medical College of Wisconsin for Free Psychological First Aid Training**

Hello! We would like you invite you and/or representatives from your agency to a **free training** in Psychological First Aid hosted by the Department of Pediatric Psychology and Developmental Medicine at the Medical College of Wisconsin on **March 19, 2026 from 9:00 – 4:30**. A light breakfast as well as lunch will be provided to attendees.

Psychological First Aid (PFA) is an evidence-informed approach to help individuals of all ages in the immediate aftermath of disaster (human-made mass casualty events or natural disasters) and terrorism. PFA is designed to reduce the initial distress caused by traumatic events and to foster short- and long-term adaptive functioning and coping. PFA was developed with the objective of providing early mental/emotional assistance in the initial days following an event. The core skills are designed to be helpful in addressing the survivors' and responders' needs and concerns. Importantly, PFA can be implemented by a range of individuals in the community, **so no prior formal mental health training is required to learn and provide PFA.**

PFA is designed for delivery in diverse settings including but not limited to shelters, acute care facilities, schools, disaster assistance service centers, homes, business, faith communities, and other community settings. Individuals such as first responders, clergy, community support workers, teachers, case workers, and community members can be trained as the goal is providing practical support in the immediate aftermath of a traumatic event as a bridge to more formal mental health care if needed. We believe that your organization would be in a key position to support our community in the aftermath of a disaster, and we hope that you will consider this opportunity for yourself and/or your colleagues.

Training will be provided by trainers through the Complex Trauma Training Institute. The training will be an in-person event on the Medical College of Wisconsin main campus.

**Please see the flyer (attached to this newsletter) for additional information, which includes a link for registration.** Feel free to contact me with any additional questions.

Katy Sage, PhD, NCSP  
Assistant Professor, Medical College of Wisconsin  
Division of Pediatric Psychology and Developmental Medicine  
Pediatric Psychologist, Children's Wisconsin WI License 4160-57

*Psychological First Aid (PFA) is an evidence-informed approach to help individuals of all ages in the immediate aftermath of disaster (human-made mass casualty events or natural disasters) and terrorism.*

# School Nurse Blog

**[The Relentless School Nurse: This Is How Nursing Shows Up-On the Record](#)  
January 31, 225 Robin Cogan, Med, RN, NCSN, FNASN, FAAN**

In nursing, we live by a simple truth: *if it isn't documented, it didn't happen*. Documentation matters. It is not about paperwork—it is about accountability, continuity, and making professional judgment visible in systems that rely on records to function.

The official public comment period for the U.S. Department of Education's proposed rule, *Reimagining and Improving Student Education*, which would reclassify nursing and other graduate education programs as non-professional, opened with its publication in the Federal Register on January 30, 2026. The comment period is open for 30 days. **Comments must be submitted by March 2, 2026.** [Read blog](#) to learn how to submit public comments.

## Nursing Education:

### What They're Saying vs. What's Actually True

*Understanding the U.S. Department of Education's proposed reclassification*

<u>What They're Saying</u>	<u>What's Actually True</u>
<ul style="list-style-type: none"><li>● Nursing degrees aren't "professional" because nurses are already licensed</li></ul>	<ul style="list-style-type: none"><li>● Nursing education is intentionally layered to match responsibility and complexity</li></ul>
<ul style="list-style-type: none"><li>● Professional degrees must be required for first entry into a profession</li></ul>	<ul style="list-style-type: none"><li>● Many professions include advanced professional degrees beyond initial licensure</li></ul>
<ul style="list-style-type: none"><li>● Supervision or collaboration means a role isn't fully professional</li></ul>	<ul style="list-style-type: none"><li>● Regulation and collaboration protect the public—they don't erase professionalism</li></ul>
<ul style="list-style-type: none"><li>● State practice variation weakens professional identity</li></ul>	<ul style="list-style-type: none"><li>● State laws reflect politics, not the rigor or value of nursing education</li></ul>

**Nursing is a profession. Nursing education is professional education.**

# Your Local Epidemiologist Blog

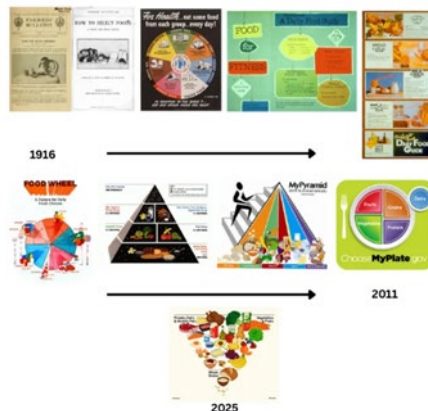
## What's new in the 2025–2030 Dietary Guidelines and why it matters (or doesn't)

By Megan Maisano, MS, RDN

Feb 11 Guest Post

On January 7, USDA and HHS released the 2025-2030 [Dietary Guidelines for Americans](#) (DGA).

There was more attention to this update than usual, which is a good thing. But many of you had lingering questions about what actually changed and why it matters. [Read blog.](#)



# Allergy & Asthma Network



Welcome to the [Allergy, Asthma & Immunology Innovations](#) podcasts.

## Understanding Food Allergy Labels

Co-hosts Dr. Payel Gupta and Kortney speak with Marion Groetch, MS, RDN, a registered dietitian, to learn about U.S. food labeling laws and how they affect dietary choices for people with food allergies. They talk about help what food allergens to look for on packages, what the "may contain" warning means, and what to do when labels are unclear.

Sponsored by Genentech

[LISTEN NOW!](#)

## Food Allergies in School: A School Nurse's Perspective

Dr. Gupta and Kortney are joined by Elizabeth Elliott, RN, a school nurse and President of the Maryland Association of School Health Nurses, to find out how school nurses prepare for food allergy emergencies and build partnerships with parents and teachers to ensure safe schools. From training staff to identify allergic reactions to ensuring medicine is readily available, school nurses play a vital role.

Sponsored by Genentech

[LISTEN NOW!](#)

# Practice Points

By Louise Wilson, MS, BSN, RN, LSN, NCSN, FNASN



## Act Like a Nurse Speak Like and Educator

A staggering 40 percent of school-aged children in the United States have at least one chronic health condition (CDC 2024)! If 40 percent of school-aged children had a reading disability I imagine schools would be hiring reading specialists for each school.

Students with chronic health conditions are more likely to miss significant time in school than their peers without health issues. Students must attend school regularly to learn and be successful. The American Academy of Pediatrics has called chronic absenteeism a vital sign for pediatric health (Johnson et. al. 2023). Poor school performance is associated with poor adult health outcomes.


Chronic absenteeism refers to missing too much school for any reason, including excused and unexcused absences as well as suspensions. Most agencies and organizations define “too much” as missing 10 percent or more of school. In 2022-23 Wisconsin’s rate of chronic absenteeism was 24 percent (U.S. Department of Education 2025).

There are multiple causes of chronic absenteeism. Balfanz and Byrnes (2012) describe three broad categories of causes:

- 1) students who cannot attend school due to illness, family responsibilities, housing instability, they need to work, or involvement with the juvenile justice system;
- (2) students who will not attend school to avoid bullying, unsafe conditions, harassment and embarrassment; and
- (3) students who do not attend school because they, or their parents, do not see the value in attending school, they have something else they would rather do, or nothing stops them from skipping school.

While school nurses may not be able to address all the causes of chronic absenteeism, they can leverage their knowledge of the educational system and their health expertise to address chronic health conditions among their students. A recent article published in the *NASN School Nurse* describes using the multi-tiered systems of support (MTSS) to address chronic absenteeism in students with chronic health conditions (McCutcheon 2026). I sincerely hope you each take the time to read the article. I will summarize a few key points and add some of my own.

*A staggering 40% of school-aged children in the United States have at least one chronic health condition (CDC 2024)! Students with chronic health conditions are more likely to miss significant time in school than their peers without health issues.*



Many school nurses already use many of the interventions outlined in the article. Using data, school nurses can identify students at risk of chronic absenteeism as well as document the impact of their interventions. Documenting impact is an area that is often difficult for school nurses. It is difficult to demonstrate that a nursing intervention has made an impact on the long-term health of a student. Attendance is an outcome understood by school administrators. Demonstrating that your nurse-led interventions kept a student in school or in the classroom, is therefore critical in the school setting.

When school nurses collect health history information, they use a Tier 1 intervention that promotes health equity and ensures students receive the care they need to consistently attend school. By collecting data on the number and kinds of student chronic health conditions in your district, you are building a basis for the targeted interventions that will help keep students in school.

Other Tier 1 universal interventions mentioned in the article include educating parents and students on the importance of school attendance and attendance policies, monitoring student daily attendance, and monitoring health trends. The Attendance Works resources shared on page 8 of this newsletter might assist you.

Tier 2 interventions address the needs of students identified with a chronic condition. Did you ever consider your writing an Individualize Healthcare Plan (IHP), Student Health Plan (SHP), or an Emergency Action Plan (EAP) as a Tier 2 intervention? It is! Now tell your school administrator.

Teaching staff to follow the SHP or EAP is a Tier 2 intervention that promotes keeping the student safe and in school. Being able to successfully prevent or treat an asthma attack at school not only promotes the student's overall health but keeps them in school (e.g., improves attendance). Next time you or the staff you trained (nurse-led intervention) prevent or treat an asthma attack consider documenting the impact on that student's attendance, not just on their health.

Many Wisconsin school nurses have helped their districts implement stocked (emergency) medication protocols. This too is a Tier 2 intervention. One Tier 2 intervention mentioned in the article that I had not considered is having signed releases of information for students with the most severe chronic health conditions. These releases facilitate communication between the provider and school nurse.

Active monitoring of attendance should begin early in the school year. The percentage of school days can be calculated at any point in time. Missing two days during the first 20 days of school is already at 10 percent. Patterns of frequent absences may indicate uncontrolled, undiagnosed, or exacerbation of health conditions. These patterns may also indicate social issues. Addressing all of the reasons may help facilitate early diagnosis and intervention, both medical and social. Consider which students are displaying attendance issues this school year and flag them for Tier 2 interventions next school year.

Tier 3 interventions require collaboration with other student services disciplines and administrators given the intensive nature of the interventions. Tier 3 is for students who require additional support beyond those already provided at Tier 2. Here is where a school nurse led case management approach might be used. An example of a student who would benefit from this approach is one returning to school after prolonged illness or hospitalization.

Many Wisconsin school nurses are actively involved in attendance issues. Some might consider getting more involved given it is an outcome valued by educators. I like this article because it frames our nursing interventions using MTSS. This is the framework used by the educational system. School nurses who bridge the healthcare and educational systems need to use and share their interventions in a format understood and appreciated by their school administrators and educational colleagues. Act like a nurse and speak like an educator!

Balfanz, R. and Byres, V. 2012. The Importance of Being in School: A Report on Absenteeism in the Nation's Public Schools. Johns Hopkins University Center for Social Organization of Schools.

CDC. 2024. *Managing Chronic Health Conditions*. <https://www.cdc.gov/school-health-conditions/chronic-conditions/index.html#:~:text=In%20the%20United%20States%2C%20more%20than%2040%25,%20Addressing%20potential%20emergencies%20%20In%20school%20services>

Johnson, S. B., Edwards, A., Cheng, T., Kelleher, K. J., Kaminski, J., and Fox, E. G. 2023. "Vital Signs for Pediatric Health: Chronic Absenteeism." *NAM Perspectives*. Discussion Paper. National Academy of Medicine, Washington, DC. <https://doi.org/10.31478/202306c>.

McCutcheon, K. 2026. "Using a Multi-Tiered System of Support to Address Chronic Absenteeism in Students with Chronic Health Conditions." *NASN School Nurse*. DOI: 10.1177/1942602X261416898

U.S. Department of Education. Chronic Absenteeism. 2025. <https://www.ed.gov/teaching-and-administration/supporting-students/chronic-absenteeism>

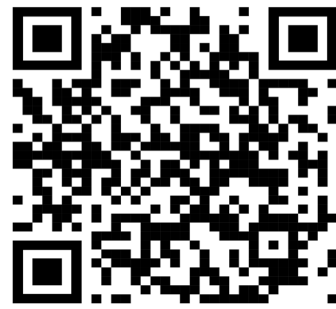
*Many Wisconsin school nurses are actively involved in attendance issues. Some might consider getting more involved given it is an outcome valued by educators.*

This publication is available from:  
Learning and Support  
Student Services Prevention and Wellness Team  
(608) 266-8857  
<https://dpi.wi.gov/sspw/pupil-services/school-nurse>

February 2026 Wisconsin Department of Public Instruction

The Department of Public Instruction does not discriminate on the basis of sex, race, color, religion, creed, age, national origin, ancestry, pregnancy, marital status or parental status, sexual orientation, or ability and provides equal access to the Boy Scouts of America and other designated youth groups.





Learn more about  
**Our Mission**

**The George IV Recovery Foundation** provides rehabilitation assistance, harm reduction programming (Naloxone Overdose Resource Kits), drug education/prevention with our partner the Addiction Resource Council, and lastly, we work with WI legislators and the Governor's Office to pass drug addiction legislation to save lives in Wisconsin.

Our organization has distributed over 400 Naloxone Overdose Resource Kits to +60 school systems and +215 businesses and organizations in Wisconsin. They are a self-educating Naloxone Kit with 3 QR codes that provide a short video on how to identify an overdose and administer Narcan. Also, statewide resources and the DHS Naloxone locator site.

With an average of 22 adolescents 14-18 years of age dying each week in the US and over 640 Wisconsin youth between 2016 and 2023, Naloxone is needed to save a child in a school environment. You only have 7-8 minutes to live from an opioid overdose, mounting a Naloxone Kit in your school/business will potentially save lives!!

**Please email George Moore at [gemoore3@att.net](mailto:gemoore3@att.net) or call 262-488-6747 and request your FREE Naloxone Kit.** If you need more than one, the organization should be able to meet your needs.

Please provide the following: Name, Title, Full Address and School System.  
To learn more about their foundation please visit: [givrecoveryfund.org](http://givrecoveryfund.org)

**Burlington Schools (Qty. 23)**



**Narcan Kit Contents**



**Wisconsin Youth Opioid Overdose Facts**

- An Average of 22 Adolescents 14-18 Years of Age Die Each Week in the US From an Opioid Overdose
- From 2016 to 2023 The Leading Cause of Death for the Youth Population Was 640 Overdose Deaths
- Drugs Laced with Fentanyl Has Become the Leading Cause of Death for American Teens. In 2024, 94% of Wisconsin Teen Overdose Deaths Were Due to Fentanyl
- DEA Confiscated 100M Counterfeit Pills in 2024 Over 70% Laced with Fentanyl
- The Majority of Drug Overdoses Occur from ***Fentanyl Laced Non-Opioid Drugs***
  - THC Oil Vape Pens
  - Stimulants like Adderall and Ritalin
  - Benzodiazepines like Xanax, Valium, Ativan
  - Synthetic opioids like OxyContin, Percocet, Vicodin
  - MDMA (Ecstasy/Molly), Cocaine, Meth
- High Schools Report on Average 20% of Students Vape
- Mental Health Issues and Drug Use Go Hand and Hand
  - WI Schools Report that 21% of Students Have Reportable Anxiety or Depression Issue
  - Kids with Mental Health Issues are Three Times More Likely to Misuse Drugs and Alcohol
- In the National Youth Risk Behavior Survey (YRBS) 20% of High School Students Reported They Can Buy Illicit Drugs on School Property
- Teens can order drugs via Snapchat and have them delivered anywhere within minutes.
- ***13 is the average age of first-time drug/alcohol use***
- 9 out of 10 addictions start in the “teen years
- 5% of High School Seniors Reported Using Non-Medical Prescription Pills
- 4 out of 5 Opioid Addicts Start on Prescription Opioids
- In 2024 the Wisconsin Prescription Drug Monitoring Program (PDMP) Database Reported Over 2.5M Opioid Prescriptions Were Dispensed (WI Pop. 5.9M)
- Only 12 out of Wisconsin’s 72 counties experienced no opioid overdose deaths
- According to Milwaukee County Medical Examiner’s Office, in 2023, There Were 560 Overdose Deaths and 5,568 Opioid Overdoses
- Over 350,000 children in U.S. have lost their parents to opioid overdoses

# Children's Vision Screening Training



Join Prevent Blindness Wisconsin and local school nurses and become a **Children's Vision Screener!**

This training covers common vision concerns in children and up-to-date vision screening protocol.

**Certification is valid for three years.**

**Cost is \$75 per person.**

- ✓ **Wednesday, March 4**
- ✓ **8:30 - 10:30 AM**
- ✓ **Portage Community School District:  
Gerstenkorn Administration Building**  
305 E Slifer St,  
Portage, WI 53901
- ✓ To register for the training, please click the [here](#).



For more information:  
**Email**  
**Courtney@pbwi.org**

Medical College of Wisconsin presents

# Psychological First Aid Training

DIVISION OF PEDIATRIC PSYCHOLOGY AND BEHAVIORAL MEDICINE



**JOIN US!**

Thursday, March 19 | 9:00 AM – 4:30 PM

No cost to attend

Registration:

[https://mcwisc.co1.qualtrics.com/jfe/form/SV\\_2IX7HiJSdHcpBtk](https://mcwisc.co1.qualtrics.com/jfe/form/SV_2IX7HiJSdHcpBtk)



Psychological First Aid (PFA) is an evidence-informed, supportive intervention that can be implemented by support individuals without formal mental health training including first responders, educators, community leaders and others

PFA is designed to assist individuals and families in the aftermath of disaster and other crises to reduce initial distress and to foster adaptive functioning.

While designed as a response to disasters, PFA skills can be used in a variety of situations requiring emergency interventions (e.g., accidents, fires, death of loved ones, removal from home, etc.).

**Location: Medical College of Wisconsin Main Campus - Kerrigan Auditorium | Address: 8701 W. Watertown Plank Rd., Milwaukee, WI 53226**