To all of our MSNO Members,

The MSNO Executive Committee and Board of Directors want you to know that we are listening and have heard your concerns and frustrations through the many emails, calls and conversations. The current workload for many school nurses throughout the state is unsustainable and we are very concerned for all of you. But, while our concerns for your wellbeing are important...concern alone does not help your situation unless we do something.

This is what we are doing to bring the school nurses’ unsustainable workload to the attention of our state leadership:

- We met with the Attorney General’s office on Oct. 12th to discuss the current situation and share possible solutions.
- We met with Senator Jo Comerford’s office (Chair of the Public Health and COVID-19 & Emergency Preparedness & Management committees) on Oct. 14th about vaccine rollout strategies to youth < 12 and shared the concerns about the current workload with COVID testing and contact tracing. Subsequently, Senator Comerford invited MSNO to present at the upcoming public hearing on Oct. 21st.
- On Oct. 21st, Cathryn Hampson represented MSNO and testified at a public hearing on Children’s COVID-19 Vaccinations and Testing held by the Joint Committee on Public Health, Joint Committee on COVID-19 and Emergency Preparedness and Management, and the Joint Committee on Education. (Joint Committee means legislators from both the House and Senate are committee members.) You can listen to her testimony at about 59:30 min into this recording (part 2 of the hearing recordings). Cathryn addressed options for ways to handle vaccination of 5-12-year-olds when the vaccine is ready and spoke about the unsustainable workload the nurses are under at this time due to COVID-19 testing and contact tracing.
- We have met with our lobbyists on Oct 13th, 15th, and 21st to organize meetings and draft a formal letter to the appropriate leaders from state agencies and organizations.
- As needed, we will consider writing a press release and contacting the media.

We have identified the following urgent issues that need to be addressed:

- School Nurses are working hard and overtime consistently to make COVID-19 testing and contact tracing a success in schools during the pandemic while state guidelines for reducing transmission in schools have changed. Most school nurses are doing the contact tracing for possible in-school transmission of any individual (students, teacher, staff, visitor, etc.) exposed to a positive COVID-19 case in the school setting.
- Some CIC testers will assist with contact tracing, communication from DESE is that they are not to assist with contact tracing.
- 200 National Guard deployed to assist the COVID testing program, however, they can only assist with the least time consuming aspect of the testing program: swabbing noses. A district level employee must be present while NG is swabbing noses.
- Schools are at 100% enrollment with no remote learning & no social distancing (all restrictions lifted except for masking)
• COVID-19 cases in schools are increasing across the state (delta variant is more communicable)
• Non-exempt close contacts of COVID positive individuals are quarantining in school districts that don’t have Test and Stay programs up and running: equity issue
• School nurse leaders and/or school nurses are the primary site facilitators for up to three of the following COVID-19 testing types that districts are opting to implement:
  ○ Symptomatic
  ○ Routine pooled testing
  ○ Test and Stay
• Current state vendor (CIC) program challenges:
  ○ Logistics
    ■ Testing teams do not consistently have trained medical personnel
    ■ Inconsistent distribution and preparation of pool testing kits
    ■ Inconsistent communication with school staff and families
    ■ An equity issue with the education of school communities on 3 types of tests: equity issue (communities that are economically disadvantaged, students who are English Language Learners, homeless, and/or have special education needs)
    ■ Implementation, registration, courier services to the laboratory for processing
  ○ Consent & confidentiality process
    ■ Districts use their own information systems to obtain consent
    ■ CIC requesting access to the consent forms
  ○ On-site support
    ■ Personnel promised, not delivered for many districts
    ■ CIC program managers have high turnover and some work remotely, not on site
    ■ CIC subcontracted personnel inconsistently trained in testing program
• MA School nurses are reporting:
  ○ Concern about student health and safety with school nurses working two jobs simultaneously (potential for missing acute health conditions/emergencies, errors in medication administration, treatments; this is a systemic not competency issue)
  ○ Physical and emotional stress/burnout due to excessive workload
  ○ Resignations, early retirement, leave of absences, taking sick days
  ○ Inability to hire qualified school nurses (DESE licensure requirements)
  ○ Lack of time and resources to complete all annual DPH mandated population-based screenings (vision, hearing, height/weight, postural, and SBIRT) due to increased school nursing workload
  ○ Extreme difficulty meeting annual DESE Educator Evaluation process (including self-assessment, goal setting, artifact collection) due to increased school nursing workload
  ○ Equity issues for families:
    ■ Access to care & appointments for PCR testing
    ■ Transportation to obtain PCR tests
    ■ Financial burden related to Isolation & Quarantine of students
Language barrier related to educating families regarding testing types
- Access to Free Appropriate Public Education (FAPE)
- No school nurse was involved with the state planning for 2021-2022 DESE COVID-19 protocols that include actions for which school nurses are now responsible (unlike the year prior with the 2020 DESE School Reopening Task Force)

These are some of the solutions we are proposing:

- Provide medically-qualified personnel for every MA school implementing COVID-19 testing programs
- Appoint an MSNO school nurse representative to participate in state-wide COVID-19 school protocol planning groups as a liaison
- Provide funding to support school districts designated specifically to support additional school nurses, other medical supports, and increased sub pay.
- Designate ARPA funds for bonuses or OT pay for currently employed school nurses
- Reduce barriers for hiring RNs who are DESE license eligible
- Offer sign-on bonuses as an incentive for RNs to work in schools
- Reduce requirements for DPH population based screenings for the 2021-2022 school year
- Waive/Modify DESE mandated Educator Evaluation including eliminate goal-setting and narratives for the 2021-2022 school year

Please continue to bring your concerns to our attention. You can do this by attending MSNO Regional Meet & Greets to share them with your region chairs. You can also email us at info@msno.org, and let us know what is going on in your district. Please also consider joining our board and the work that we do to advocate for school nurses in Massachusetts. It does not need to be a lot of your time, but it can be a way to transform your frustration and anger into work that makes a difference in the lives of your colleagues and your students.

We are in this together,

The MSNO Executive Committee

Doreen Crowe, President@msno.org

Cathryn Hampson, Presidentelect@msno.org

Jenny Gormley, Pastpresident@msno.org

Carilyn Rains, Nasndirector@msno.org

Lee Waingortin, Treasurer@msno.org

Jessica Gervais, Secretary@msno.org