

Services provided by  
School Nurses to keep  
children healthy and  
safe so they may learn

- Maintain and update emergency health records on all students
- Annual Mandatory Screenings:
  - ~Heights and Weights with BMI calculation on students in grades 1, 4, 7, and 10
  - ~Hearing and Vision screening on students in grades K-5, 8, and 9
  - ~Postural screening on students in grades 5, 6, 7, 8, and 9
- Health education
- Medication administration
- Treatments
- CPR/AED and First Aid certification for staff
- Mental Health
- Illness and Injury assessment
- Immunization and physical examination checks
- IEP and 504 support
- Development of Policies and Procedures



Rebecca Johnson, RN, BSN  
School Nurse Leader  
Phone -978-632-4158  
Fax-978-630-3463  
Email: johnsob@gardnerk12.org

Gardner High School  
Jill Robinson, RN, BSN  
Phone-978-632-3934  
Fax-978-632-2651  
Email: robinsj@gardnerk12.org

Gardner Middle School  
Lisa Ellis, RN, BSN, NCSN  
Phone-978-632-3324  
Fax-978-632-4234  
Email: ellisl@gardnerk12.org

Elm Street School  
Carol Hubbard-Kelley, RN, BSN, NCSN  
Phone-978-632-4449  
Fax-978-632-4382  
Email: kelleyc@gardnerk12.org

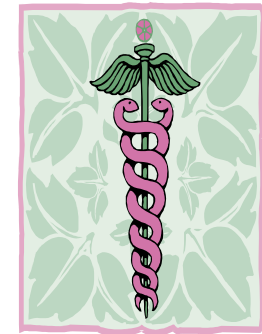
Helen Mae Sauter School  
Shelley Huntoon, RN, BSN, NCSN  
Phone-978-632-4563  
Fax-978-630-4079  
E-mail: huntoos@gardnerk12.org

Waterford Street School  
Rebecca Boutwell, RN, BSN, TNCC  
Phone-978-632-4158  
Fax-978-630-3463  
E-mail: boutwer@gardnerk12.org

Our Lady of the Holy Rosary School  
Laurie DeMalia, RN, BSN  
Phone-978-632-5372  
Fax-978-630-1433  
E-mail: demalil@gardnerk12.org

Float Nurse  
Cathryn Hampson, RN, BSN  
Phone-978-632-4158  
Fax-978-630-3463  
E-mail: hampsc@gardnerk12.org

## Gardner Public School Health Services



*The Mission: To serve  
our students, to  
educate, and promote  
a healthy beginning  
for a healthy life.*

# Every child needs a School Nurse

Children come to school to learn. However, even normally healthy children get sick during the school day. From belly-aches and headaches, to injuries on the playground, you can



**"Did you eat breakfast today?"**

be sure that the School Nurse at your child's school is prepared and ready for whatever comes her way. The School Nurse is an advocate for the health and safety of each and every student. She tracks playground injuries and makes recommendations of changes if need be.

She also maintains emergency information on every student and updates changes throughout the year. Seeing anywhere from 30-60 kids per day, they are very busy. No matter how busy, they are available to every student and parent throughout the school day.

School Nurses take care of many students with a variety of complex medical issues including Diabetes, Seizure Disorders, Psychiatric Illness, ostomies, central lines, Cystic Fibrosis, Cardiac Disease, Kidney Disease, Asthma, Orthopedic conditions, and much more. We create Care Plans to address a student's medical need in the school setting and ensure their health and wellness in school.

## School Nurse Qualifications

School Nurses are required to have a Bachelor of Science in Nursing Degree as well as 2 to 3 years of experience in a Pediatric setting. We are also required to obtain certification through the Department of Elementary and Secondary Education (DESE). This is done by passing the MTEL Literacy exams which are also required for all teachers.

Five years after having initial certification through the DESE, school nurses must apply for Professional Licensure. In order to obtain Professional Licensure, one must pass the National Certification of School Nurses exam. This exam requires proficient knowledge of comprehensive Pediatric Health. GPS has 3 School Nurses with this professional certification, thus having the initials NCSN after their name.



School Nurses are always learning. We attend conferences and trainings to enhance our knowledge and skills. We are required to do 15 contact hours every 2 years to maintain our nursing license. After receiving NCSN, we are also required to obtain 75 contact hours and 150 Professional Development Points every 5 years to maintain professional licensure through the DESE.

We work closely with the Massachusetts Department of Public Health. We receive funding from them for School Health Services via the Essential School Health Services Grant.

## Send them to school or keep them home?

- **Fever—keep them home** if your child has had a fever 100.0 or higher in the last 24 hours. Tylenol or other fever reducers should not be used in the morning to reduce a fever prior to sending your child to school. A fever is a sign of infection and your child should not be in school if fever is present.
- **Chicken pox—keep them home** until all blisters are crusted over and dry or lesions are faded
- **Diarrhea—keep them home** if your child is experiencing unusual diarrhea
- **Fifth's Disease—send them to school** once the rash appears; children are no longer contagious once the rash appears and may attend school
- **Hand, Foot, and Mouth Disease (Coxsackievirus)—send them to school** as long as your child is well enough to attend school
- **Head Lice—send them to school AFTER treatment** If your child has head lice, they will be sent home when it is found. After they are treated they may come back to school the next day; they will be checked each morning by the school nurse
- **Impetigo—send them to school 24 hours AFTER treatment is begun**
- **Measles—keep them home** for 4 days after rash appears
- **Mouth Sores—keep them home IF** saliva or exudate is excessive
- **Pertussis—keep them home** until 5 days after antibiotics have begun
- **Pinworm—send them to school AFTER treatment has begun**
- **Contagious Pinkeye (Conjunctivitis)—keep them home UNTIL 24 hours** after treatment is begun
- **Rash—keep them home** until diagnosed as non-contagious
- **Ringworm—keep them home** until treatment has begun
- **Rubella—keep them home** until 7 days after rash appears
- **Scabies—keep them home** until treatment has been completed
- **Shingles** same as Chicken Pox, unless the rash can be completely covered
- **Strep Throat—keep them home until 24 hours** after treatment has begun, AND 24 hours without fever

*If your child has been unable to sleep due to discomfort, flu symptoms, cold symptoms, or fever, they should rest at home. If your child has a fever, rash, or pain of unknown origin, they should rest at home. If symptoms continue, they should be evaluated by a physician.*