# A SCHOOL NURSE'S ROLE AFTER CRITICAL ILLNESS

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## Introduction

Over the last decade, the number of children receiving intensive care unit care in the United States has increased.[1] Children receive intensive care for chronic conditions as well as injuries, Illness, and critical conditions. As hospitals become better at preventing death in pediatric critical illness, the medical community has shifted its focus to helping manage the **long-term** effects of critical illness.[2,3] In the medical field, these effects are now known as **Post-Intensive Care Syndrome in Pediatrics** (**PICS-p**), and the term covers the physical, cognitive, social, and emotional consequences of illness.[4] Children also experience substantial absenteeism from school, which may negatively impact them after critical illness.[5]

Recently, a team of researchers from the University of Minnesota, University of Connecticut, National Association of School Nurses, and the University of Michigan set out to find out what school nurses know about PICS-p and what their experience was with providing care for children after a stay in the Pediatric Intensive Care Unit (PICU). The research team conducted an online survey of school nurses in the United States, distributed by the National Association of School Nurses to a random sample of its members and promoted on social media.[6] In the end, 79 school nurses completed the survey. This brief summarizes the researchers' study findings and recommendations.

## Findings

### Respondents that had provided post-PICU care in the last academic year

#### *Experience and Comfort*

- 54% of respondents reported providing in-school care for a child returning to school after critical illness
- of school nurses that had provided that type of care, 71% agreed that they felt comfortable caring for children upon their return to school
- over 95% felt the care they provided to a child returning to school following critical illness was important or very important

#### *Communication and Understanding*

Of the school nurses who had provided care,

- 63% received a discharge summary or written instructions after the child's discharge
- 21% reported speaking to a medical provider before the child's return to school
- 40% responded to a question regarding their understanding of changes to the child's medical needs, but **more than half** of those who responded said **they did not understand the changes**

***Feeling Prepared***

School nurses who cared for a child after critical illness were asked about their preparedness and supports available to them upon the child's return.

- 58% said they felt prepared to care for a child after critical illness, and
- 60% said that they would feel supported in caring for a child after critical illness

## All respondents

***Knowledge of and Interest in PICS-p***

- **only three** respondents (less than 4%) said they **were familiar with PICS-p**
- **almost all** respondents **stated they would be interested (43%) or very interested (51%) in receiving education about PICS-p**.
- when asked how they would like to learn, 63% of respondents said that virtual webinars would be their desired educational mode
- topics of interest included the conceptual framework for PICS-p, how to screen for PICS-p and other PICS-p resources

***Supporting After Hospitalization***

Respondents were asked what they feel the role of the school nurse should and would be for a child who has returned to school after a PICU hospitalization.[7]

The following percentages believed that nurses **should**

- develop a care plan after hospitalization - 90%
- provide hands-on care - 85%
- prepare classmates and families - 80%
- help with schoolwork help and support for absenteeism - 42%

The following percentages believed that nurses **would**

- develop a care plan after hospitalization - 85%
- provide hands-on care - 85%
- prepare classmates and families - 70%
- help with schoolwork help and support for absenteeism - 43%

## Implications and Recommendations

The researchers believe that school nurses are well suited to lead post-PICU care since they see the kids so often and can identify signs and symptoms. According to the study, school nurses generally feel prepared to care for children after hospitalization but need more information and communication.

"School nurses are uniquely positioned to support equitable recovery and academic success for children recovering from critical illness. However, our findings suggest the skills of many school nurses may be untapped."

In order to better support student reintegration, the researchers recommend

1. **Using a school nurse-facilitated, team-based approach** involving school nursing providers, outpatient pediatric providers, and the pediatric critical care community to:

    - **identify** signs and symptoms of PICS-p,
    - **implement** evidence-based care strategies,
    - **coordinate** follow-up with healthcare providers and community resources, and
    - **advocate** for appropriate educational accommodations and trauma-informed practices.

2. **Having school nurse organizations and pediatric healthcare experts co-develop training materials for school nurses,** like webinars about PICS-p, brief decision aids, and care coordination templates.

3. **Hospitals should develop standardized processes for communicating with school nurses following PICU discharge**, with appropriate family consent, to ensure school nurses receive timely information about the child's hospitalization, anticipated post-PICU needs, follow-up plans, and recommended school accommodations.

Strengthening communication, education, and collaboration across healthcare and school settings can help ensure that children's recovery continues well beyond PICU discharge.

## Resources

**Post-PICU investigators**
Includes links to relevant research, events, and publications.

**Author Contact Information**
Contact Mallory Perry or Julia Heneghan to learn about opportunities for collaboration.

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[7] Respondents were allowed to select multiple responses