

School nurses struggle with logistics, resources to adopt 'test to stay'

10-22-2021, Bennington Banner, by Greg Sukiennik



Shannon Tatro works at her desk in the health office at Mount Anthony Union High School on Thursday.

- CAROLINE BONNIVIER SNYDER

BENNINGTON BANNER



Shannon Tatro is the school nurse at Mount Anthony Union High School. While Tatro enjoys being a school nurse, she said COVID-19 has added to nurses' workloads while limiting their ability to triage students whose symptoms previously could have been treated on campus.

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BENNINGTON — When it comes to the state Agency of Education's "Test to Stay" program, area school districts are "wait and see."

"Logistically, we're still trying to figure it all out," Mount Anthony High School nurse Shannon Tatro said of the Southwest Vermont Supervisory Union's work on the program, which requires school nurses or staff to test unvaccinated students who have been in close contact with someone at school who is COVID-positive.

Current state policy is that close contacts who are vaccinated may continue to attend class if they are symptom-free, while students who are not vaccinated must quarantine.

That's led to some heated phone calls from families to Mount Anthony Union's school nurses — so much so that Superintendent James Culkeen recorded a brief video message, asking families to be more respectful.

The agency has made a number of [testing programs](#) available to schools: test-to-stay antigen testing, rapid response PCR (nasal swab) testing and take-home PCR testing.

Tatro said the test-to-stay option would involve nurses testing students daily for seven days in a row that have been considered contacts of an exposure and are unvaccinated. Those students would then have to wait 15 to 20 minutes for the results to find out if they can continue their school day — hence “test to stay” — or need to go home.

When the number of unvaccinated close contacts remains low, the logistics of that strategy are easier. But if there's a spike in close contacts, finding room for everyone to wait for their results is a concern, Tatro said.

“If there's 20 kids, then I have to have a place to sit 20 kids, and you're taking over the gymnasium or the auditorium or the cafeteria,” she said. “The planning is not done yet, but we're further along than we were last week. “

In the Bennington-Rutland Supervisory Union, “We continue to explore ways to provide surveillance testing, but test supply has been inconsistent, and we still do not have personnel to administer these on a weekly basis,” Superintendent Randi Lowe

said. “The state is just beginning to pilot ‘Test to Stay’ in a few districts, and we anticipate more details about this option in the upcoming weeks.”

At the Vermont Superintendents Association, past president Jeanne Collins, superintendent of the Rutland Northeast Supervisory Union, and current VSA president Dave Younce, superintendent of the Mill River Unified Union School District, both said their districts had yet to implement the plan because of a lack of resources.

“Our district has not implemented Test to Stay, due to lack of staffing to do so. We are trying to problem solve how to make it work,” Collins said. “Likely we can, if only a class of students needs to be tested.”

Collins said Neshobe School in Brandon recently had four classes out, “which means over 80 people would need the test on a daily basis for second days, and that is not something we could accommodate. If we do eventually do it, it may be dependent on the numbers.”

Younce agreed with Collins on the logistics. “Inability to staff is the key issue, although we are engaging in the training in the event something changes,” he said.

In the MAU district, 57 percent of high school students and 48 percent of eligible middle school students are vaccinated, and the middle school percentage will fall to 37 percent when children ages 5 to 11 are approved for the Pfizer vaccine by the U.S. Food and Drug Administration and the Centers for Disease Control and Prevention. That approval is widely expected.

Because students under 18 need their family's permission to get vaccinated, a lot rides on what the parents think of vaccination. Tatro explained that some families are opposed, and not letting their kids get the shot.

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“I have several students that are waiting to turn 18 so they can get vaccinated,” Tatro said.

While Tatro enjoys being a school nurse, she said COVID-19 has added to nurses' workloads while limiting their ability to triage students whose symptoms previously could have been treated on campus.

“We used to be able to ... do an assessment and treat their symptoms, and if we could send them back to class, that was the goal,” she said. “Now if a student presents with any of the eight COVID symptoms, they automatically go home. There's no triage, there's no assessment, it's how fast can we get them out the door so that they're not potentially exposing other students. So, that's where I say they've taken the nurse out of school nursing.”

But a lot of those symptoms — headache, stomach upset, nausea — can be brought on by stress. And Tatro said psychosomatic symptoms — in which stress and anxiety cause physical ailments — are very much on the upswing.

“Don't forget your freshmen are really seventh-graders. They haven't been in school since seventh grade,” Tatro said. “They've been working with a computer, trying to connect with the world remotely at a vulnerable, impressionable time. ... Now, fast forward a year and a half. You're throwing them in with 950 other kids. Yeah, so I give them a lot of credit; it's gotta be tough.”

Despite the stress of providing health care in a pandemic, Tatro said she and her fellow nurses still love their jobs and take satisfaction from being able to help students.

For example: Because the virus can cause heart symptoms, recovering athletes must gradually elevate their heart rate over seven consecutive days to get back in the game. Tatro recently helped a student-athlete meet that goal, coming to work over the weekend to make it possible.

“The mom was so appreciative, and she sent the nicest email that it filled my cup back up,” Tatro said. “It only takes one person to say, ‘You know what, this is why I’m here.’ ... I said, ‘Yup, this is what I’m supposed to be doing. This is why I’m doing it.’ I can’t get lost in the negativity and the saltiness ... I’m here for the students.”

CHANGE IN GUIDANCE

Meanwhile, the state Agency of Education on Thursday [updated its contact tracing guidelines](#) to change the definition of a close contact — as long as universal masking is still in place and consistently applied.

Where a “close contact” was previously defined as someone within 6 feet or less of an infectious person for 15 minutes or more, it is now a person “within 3 feet of an infected person for a total of 15 minutes or more over a 24-hour period.”

According to the agency’s guidance, that new definition should be used “when it is reasonably possible to identify close contacts.”

When dealing with younger students or situations where the new definition is unworkable, schools are advised to consider students in the same classroom or pod for four or more hours as close contacts.

The agency said the new guidelines were developed in cooperation Vermont Chapter of the American Academy of Pediatrics, the state's pediatric infectious disease medical advisors, the Vermont State School Nurses Association and the Vermont Superintendents Association.

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Sweet or scary treats from the trunk

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WILMINGTON — Trunk 'O' Treat festivities took place on Saturday, with more than 45 trunks lining both sides of the grounds of the Wilmington Antique & Flea Market. The event was organized by Wilmington resident Karina Morehead and was well attended by ghouls, superheroes, princesses, wit...

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