

## Promoting Community Health Through School Nursing

With Lisa Cagliostro

Episode 52

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### Introduction (00:01):

Welcome to the Healthcare Leadership Experience Radio Show with your host Lisa Miller. This week, the Healthcare Leadership Experience will be hosted by Jim Cagliostro. Jim brings over a decade of critical care nursing experience at highly regarded medical facilities across three states.

During his time at the bedside, he observed both the good and bad of hospital operations in several regions, giving him a unique insight and perspective on the healthcare industry.

Jim has been a part of the VIE Healthcare team since 2018, where he's made patient care and the patient experience a top priority. He has observed that keeping patients at the center of healthcare can transform the patient experience and lead to success for any health system, big or small. Here's your host Jim Cagliostro.

### Jim (00:49):

Hi, this is Jim Cagliostro and you're listening to The Healthcare Leadership Experience Radio Show on HealthcareNOW Radio. Today's guest is Lisa Cagliostro. She is my wife, you might notice we share the same last name, but we're excited to learn more today about the world of school nursing, at least school nursing in the public school system. So Lisa, welcome and thanks for joining us today.

Lisa Cagliostro (01:12):

Thanks for having me.

Jim Cagliostro (01:13):

So, we'll jump right into it and just a little bit about yourself. Tell us a little about your journey as a nurse. How did you end up as a school nurse? What kind of experience do you bring to your current role?

Lisa Cagliostro (01:24):

Well, first of all, I just want to say, with nursing, I've been very fortunate to have various experiences, and that is definitely one of the benefits of going into nursing. There's just so many different areas, different opportunities. As you'll see a little bit here with my experience, I've had a variety of experiences, which I'm grateful for.

Lisa Cagliostro (01:43):

So, I started out as a brand-new nurse in a heart and vascular care unit in Hershey, Pennsylvania. It was an intermediate level care unit. So not quite critical, the worst of the worst patients coming in, but definitely seeing more intense things than a traditional floor nursing. Then from Hershey, I was able to do some travel nursing. So another perk of nursing is nurses are needed everywhere still, and so there are these agencies that set up nurses to fill in roles in different hospitals or other places, even school nurses, they have agency nurses.

Lisa Cagliostro (02:18):

So I was able to go out to California work at Stanford Hospital in a transplant surgical unit, which is very interesting. So lung transplants was a big thing, kidney transplants and other surgeries, like thoracic surgery. Then from California, moved back to the East Coast and have settled down in New Jersey. So when I first came back to New Jersey, I was working per diem in the same-day surgery medical day stay unit at a local hospital, which was great. It was very flexible, so I didn't need a full-time job at that point and was able just to work when I could, and this was good experience as well.

Lisa Cagliostro (02:54):

Then from there, just my situation changed, so I did find a full-time job and ended up in a role as a case manager for an insurance company for their members who were needing long-term care and supports and services. So it doesn't sound like nursing, but it was a nurse case manager position and it involved assessing patients' needs and setting them up with the services that they needed so that they could remain at home if they wanted to, as opposed to going into a nursing home.

Lisa Cagliostro (03:22):

From there, I was there for about a year and a half and then went into a different hospital, part-time work. I feel I kind of came full circle back on a telemetry unit, heart surgery patients, kind of similar to where I started out in nursing.

Then as you mentioned, now I'm in the field of school nursing, which has been a recent move for me. So I've been doing that for about two years now, and I'm currently in a public school district in New Jersey working at an elementary school with students pre-K to fifth grade.

Jim Cagliostro (03:53):

That's great. As you go through, and I know this is something we've talked about, it seems like that's a long journey of many different things, but each of those roles required you to be a registered nurse, correct?

Lisa Cagliostro (04:05):

Yes.

Jim Cagliostro (04:05):

So, I guess the next question I want to ask is why is it helpful to have that experience in your current role? I would say specifically that case manager work, because that's something that seemed probably a little further from the bedside. How does all that experience that you have help you be better at your role as a school nurse?

Lisa Cagliostro (04:22):

So of course lots of careers and jobs, you're always learning, and especially true in nursing. And so I think the more experience and the variety of experience that we can get just contributes to our growth and helps us to become more well-rounded. Having those experiences, when they come up again or something similar, it doesn't take you quite by surprise, you kind of have that muscle memory, you feel that all coming back and you can handle it with a little more wisdom, you have that experience behind you.

Lisa Cagliostro (04:52):

But getting to your other question about the case management, that was probably one of the jobs that probably stretched me the most. It was different than what I had ever done as a bedside nurse or in the hospital, and it was very challenging, but it did help to, I think, prepare me more for school nursing, because that is one of the areas that you see as needed in the school and in that nursing situation.

Lisa Cagliostro (05:17):

Actually, I don't know if you've heard of the National Association of School Nurses, or NASN is their acronym, and they have this framework for 21st century school nursing practice — and it highlights the key nursing principles related to school nursing. So, there's care coordination, public and community health and leadership, and so case management falls under that care coordination pillar. There's always needs coming up, and I can even see that in the past two years that I've been in the school. Whether it's said outright or not, you kind of assess students and you can kind of see what needs they need, you talk with parents.

Lisa Cagliostro (05:52):

A lot of the job or some of it was coordinating resources and finding resources. I remember just having to get familiar with what's available right here in our county and being able to point parents to, whether it was getting free immunizations, because they didn't have insurance or other resources, like even just an eye doctor, if the student needed to be referred and checked out further for any eye issues or same with hearing.

Lisa Cagliostro (06:18):

So, a lot of that, yeah, is just kind of trying to meet the needs of the student. So I think that case management job helped, because you have to have those assessment skills to do that, and then also having the knowledge and the resources to connect parents and guardians with that.

Jim Cagliostro (06:33):

I think that's great. I know that's something we had talked about before too, and it's not something that I really thought about much. I've substituted in our own children's school district, and a lot of times you think, oh, school nursing, we're just going to be giving out saltines and ice packs, right? Very simple. Yes, we do a lot of that. "Here's a cup of water, here, sit and rest for a little bit."

Jim Cagliostro (06:50):

Sometimes there's a mental health aspect where you need to kind of talk through and what's on the kid's mind, but I love to see that case management experience being used in your role as a school nurse. Just to see, like you said, coordinating resources, where you might have a child who's diabetic or someone who's dealing with asthma.

Jim Cagliostro (07:09):

Sometimes parents don't know, or sometimes they don't have the resources, and as a school nurse you're in a perfect position to really walk parents through that process and to really be an advocate for the students. I definitely appreciate you sharing how that case management has benefited your skills and your experience as a school nurse.

Jim Cagliostro (07:29):

If you're just tuning in, you are listening to The Healthcare Leadership Experience Radio Show on HealthcareNOW Radio, and I'm your host, Jim Cagliostro. This show is sponsored by VIE Healthcare Consult, the leading healthcare advisory analytics firm helping hospitals accelerate their cost savings in margin improvement goals. We've been helping hospitals since 1999, and you can learn more about VIE Healthcare at [viehealthcare.com](http://viehealthcare.com).

Jim Cagliostro (07:58):

Okay, Lisa, this is kind of a big question, but hopefully you can narrow it down here. What would you say is the biggest challenge, or more than one if you want, what's the biggest challenge in school nursing that maybe you weren't prepared for, maybe something that surprised you?

Lisa Cagliostro Cagliostro (08:13):

Well, I would say for me, it's probably just the unpredictability of the day. You have your to-do list and there are things you got to get done, but of course you're there for the students and they're sometimes constantly coming in, and I just would never know how many students would be coming in or when. I mean, as you go through the school year and you get to know the student, you kind of start to see the rhythm, the routine.

Lisa Cagliostro Cagliostro (08:36):

Yes, there are certain students that are coming at scheduled times and you kind of prioritize your day around them, and then you have anything and everything else coming in. So I know sometimes I just find myself getting a little frustrated, like, "Oh, I can't get this thing done, but okay, I'm here for the students. They're here, I need to be available to help them with whatever they need, whether big or small," because you kind of see it all.

Lisa Cagliostro (08:59):

I don't have that emergency room experience, I kind of felt like that's more like what would prepare a school nurse for that. I know a lot of school nurses do have that experience, so yeah, just having that readiness, being prepared for the day and just not knowing, I would say, would be one of the challenges.

Jim Cagliostro (09:16):

Yeah, well, I know in talking with other school nurses who had been doing it for three, four decades, they said more and more they're seeing this need to address the psychosocial, the emotional health, mental health of students that are coming in. At least that's becoming a bigger and bigger part of the school nurse's role. Can you speak to that at all? Have you seen that much?

Are you feeling like you're learning in that area or are you surprised by the amount that needs to be addressed?

**Lisa Cagliostro (09:45):**

Yeah, definitely true. Especially in times where now there's more and more of that, even younger students, like elementary school age who have that mental health aspect and need. But with elementary school students, so I wouldn't say it's an outright ... okay, with middle school though, they're obviously going through some anxiety, they can tell you, like, "I'm depressed, I'm sad." Elementary school students, they may not be able to tell you as easily.

**Jim Cagliostro (10:12):**

You got to play detective a little.

**Lisa Cagliostro (10:13):**

Right. You see a lot of the same students coming in sometimes with just general complaints, my stomach hurts or I'm tired, or just different things. So yeah, you got to talk to them in a way that they'll understand and asking the right questions. I mean, there were a handful of times where I remember students coming in just in a panic, breathing heavy. Something had happened and it was caused by that they were now anxious or upset, or just experiencing different symptoms that way. It wasn't necessarily a physiological medical thing, but more a mental health issue. So yeah, I would definitely say that's prevalent in elementary school students as well.

**Lisa Cagliostro (10:56):**

I would say, yeah, going along with that, that another challenge might be just knowing what's serious and what's not, especially with elementary school students, because as I mentioned, they can't always tell you what's going on. So, you don't know if they're just trying to get out of class or if it's something legitimate where, okay, we got to investigate this little more and maybe get you immediate care. So, that's definitely been another challenge.

Jim Cagliostro (11:20):

But, well, that's when it helps, I think you've talked about this before, building that relationship with your students. Not just the students, but the parents, because I think you really get to know them. It's hard if you're going to substitute or you're going to cover another school and you do not know the kids, you do not know the parents, as opposed to, hey, there's nurses who are in schools for 30 years and they really know.

Jim Cagliostro (11:41):

They've seen all the kids come through and they've known the parents for that amount of time, I think it really helps just having that relationship with the children and with the parents. I know you're still new getting into this, but I'm sure over the course of a year it got easier and easier to work with different students and different parents, because you got to know them.

Lisa Cagliostro (11:59):

Yeah, absolutely. I would say, yeah, after talking to parents, most of the time I did feel a little more at ease, because they're like, "Oh yeah, okay, they always do this, or this is what happens when this happens. When they're experiencing this, this is what it is and this is what we do." So yes, definitely tapping into those resources that are right there, the parents, guardians, grandparents.

Lisa Cagliostro (12:18):

I know a lot of times they would appreciate a phone call. Even if it was seemingly something small, they would appreciate that phone call as well, and that does help, like you said, to build that relationship and rapport with them.

Jim Cagliostro (12:29):

Sure. I mean, that's important in all areas of nursing, I'd say, the relationships that you build with your patients.

Lisa Cagliostro (12:36):

Mm-hmm.

Jim Cagliostro (12:37):

Okay, so we know that COVID-19 impacted every aspect of healthcare and school nursing was no exception. The situation in the schools for anybody who's a parent who has kids in schools, they know that COVID-19 directly impacted what school was like for kids. So from your perspective as a school nurse, you started after COVID came to this country, right? So, how did COVID-19 impact the role of the school nurse? Can you tell us a little bit about that experience?

Lisa Cagliostro (13:06):

Sure. Like you mentioned, so for me, pandemic school nursing is all I've known, because I did start right when the pandemic started as my role as a school nurse, so I don't really have that frame of reference for what it was like before versus what it was like after COVID. Which may be a good thing, maybe not, I'm not sure. So as you mentioned, yes, COVID-19 has affected everyone, especially in healthcare and school nursing is no exception, like you said.

Lisa Cagliostro (13:34):

So, I guess ways that it has definitely impacted school nursing is contact tracing. Of course, that was never really a thing in the schools before COVID, and it seemed like whenever a student would come in with certain symptoms, we would always see them through that COVID filtered lens, looking at those specific symptoms that we've all been put into our heads over and over again. Different protocols were put into place that we were following regarding COVID and new policies.

Lisa Cagliostro (14:06):

The district I'm in, we've got multiple nurses, it's a bigger district, and so I remember when I first started, we didn't even have students in the building till mid-October.

Jim Cagliostro (14:16):

That's right.

Lisa Cagliostro (14:16):

So the school nurses, which was, I mean, such a blessing disguise, I guess, but the school nurses were able to meet virtually, at least weekly we were meeting I remember and able to talk about, okay, so what's this going to look like? What do we need to have in place? What needs to be in our school nurse offices? What supplies? What can we do to kind of be prepared for what's about to happen and for students coming back into the school, and what we're going to be spending our time doing and seeing?

Lisa Cagliostro (14:44):

That was all new, because I remember a lot of the school nurses had never been able to have that time to meet with other school nurses like that and kind of talk about things. Also of course a lot of education with parents, guardians, staff, and students. It changed just how we interacted with students and with staff and parents as well, so there was just a lot more time it seemed needed for these COVID-related tasks on top of what school nursing was already.

Jim Cagliostro (15:14):

Sure.

Lisa Cagliostro (15:14):

So I know there'd be days, sometimes I'd be getting ready to go home and then I'd get a phone call or an email from a parent regarding their child had tested positive, and then of course they'd been in school that day. So back when we were really closely contact tracing, that would set me back. I'd have to stay, I'd have to figure out who was where, and work with my principal to try to figure out, okay, who should we call so that we're not scrambling in the morning to tell these parents don't send your kids in because they were exposed to someone who tested positive?

Jim Cagliostro (15:43):

Yeah.

Lisa Cagliostro (15:43):

So, that was a big thing. So yeah, I guess a lot more communication with parents and guardians, and also I would say with administration. Between school nurses and administration, at least in our district we would report at least weekly the total counts, but as they're coming in, we would be emailing administration about staff, about students who had tested positive and who all that was going to affect.

Lisa Cagliostro (16:08):

So I feel like there was definitely more interconnectedness, you just thought how one person having this virus would affect a whole class, would affect a school at times. So we were dealing with a lot of that, and in a way though, like I mentioned, certain things have come out of it that have been good, that may not have come out if COVID had not come around and impacted healthcare.

Jim Cagliostro (16:33):

Yeah.

Lisa Cagliostro (16:34):

So, one of those things I would say is that it highlighted the role of the school nurse. I'd even heard that from nurses who've been doing school nursing for a long time, where they just kind of came in, did their thing, which is fine and they did their job, but they didn't really have a say as far as policies or input into what needed to happen, because administration didn't really know what to do.

Lisa Cagliostro (16:59):

They had these guidelines from the state that they had to follow of course, but they had never dealt with anything like this and what that was going to like for students and for staff and the community, so they did want the

input of school nurses, most districts, I would say. Some maybe not, I don't know, but I can only speak to my experience right now, but we did have some virtual meetings with administration and the school nurses, and they wanted to know what was working, what wasn't.

**Lisa Cagliostro (17:23):**

So, in a way it was good that it did kind of bring the role of the school nurse to the forefront and just the value that school nurses do have in their schools, but I know there's still even a fight just to get one school nurse per school. That's just not even a reality for some districts or for some schools and areas, which is really a shame. So, I think it's kind of brought to light the importance of having a school nurse in each school as well.

**Jim Cagliostro (17:45):**

Those are great points, thank you for sharing it. In terms of support, can you share a little bit about the support? Because I know sometimes there were difficult situations and you had a strong principal behind you and other nurses in the district, that some people out in a rural school district might not have that same support system, or maybe they don't have administration that is as supportive. Can you share a little bit about that and why it's so important to have administration and coworkers who are supporting you in that role as a school nurse?

**Lisa Cagliostro (18:17):**

Sure, absolutely. Even of course just being new to the school nursing field, it's been invaluable to have that support from other nurses. Especially in the district I work at, there's a head nurse and then various other nurses, I think there may be eight or nine of us total. So just drawing off of their wisdom and experience just with regular school nursing, and then being able to brainstorm together. Because we could each bring something different to the table, and something that I might not have thought of, someone else has thought of and brought out and we can say, "Hey, that's a good idea. Let's incorporate that into what we're doing in schools."

Lisa Cagliostro (18:52):

So yes, having them and being able to just pick up the phone and be able to ask them a quick question, we would do that all the time. "Hey, I have this situation." Especially with COVID, "This person's positive and now it affects this person and this person. Oh, by the way, they have a sibling in your school in the middle school." So, we'd have to talk with one another a good bit anyway just for communication and contact tracing purposes.

Lisa Cagliostro (19:14):

But yeah, also just drawing off of their experience and what they understand about COVID now, we all are understanding. Which of course things have changed so much throughout the past several years with it, and so just being able to have them to rely on and confirm ... sometimes you just need that person to confirm what we already know, right? So, just having that confidence, "Okay, I got to call this parent, so let me just make sure I have all my ducks in a row, and this is what I understand. Okay, good."

Jim Cagliostro (19:41):

Sure.

Lisa Cagliostro (19:42):

Also, yeah, as you mentioned, administration. Yeah, it definitely makes a big difference if you have a principal or other administration who are supportive and who can say, "Hey, what do you need?" Especially in those overwhelming situations where we have to contact trace a whole class, they would say, "Okay, the secretary can help make those phone calls, I can help make those phone calls." That would just take a big burden off of me having to carve out more time in my day to make these phone calls that I already rarely have the time to do, because I have students constantly coming into the school nurse office. So, it does make or break you, I think.

Jim Cagliostro (20:16):

Well, that's a great point. That's actually something we've been looking at recently at VIE, and one of the key factors is having leadership that listens and having leadership that can understand what your challenges are or

what you're faced with, so that's great. Again, I'm thankful on a personal level that you had that support in your school, but that's something that we really should push. Not just in the schools for school nurses, but even in hospitals.

**Jim Cagliostro (20:41):**

Obviously at VIE we work more directly with hospitals but having leadership that really listens and has a direct connection with nurses on the front lines, so that they can respond appropriately and make decisions that directly improve the ability of nurses to care for their patients.

**Jim Cagliostro (20:58):**

So let's end with this, I think kind of a big picture in terms of the school nurse and the role that you have, Lisa. In an ideal situation, what kind of impact would you say a school nurse can have in the community it serves? Obviously, we work with hospitals, and we say hospitals aren't just serving the patients that are in the hospital, but we want to be an extension in terms of promoting the health within a community. How can you do that as a school nurse?

**Lisa Cagliostro (21:27):**

Sure. I think, yeah, the school nurse is in an ideal situation to impact the community. They're integral in the community, especially of course when we talk about the school community too for the students that they're serving. It's something I come to realize, which I think I knew anyway, but for some of these students, school nurse may be the only healthcare professional that they see you in the year.

**Lisa Cagliostro (21:49):**

So, unfortunately parents don't always have the time or the resources to go and have their child checked annually by their physician. They may not have a home physician, they may not have health insurance, it's just that kind of thing. If they don't have enough food eat, that's what their concern is rather than the annual well visits for their child.

Jim Cagliostro (22:07):

Sure.

Lisa Cagliostro (22:09):

Of course, students are spending a majority of their time during school year in school, and so school nurses can detect things that maybe no one else has seen or had the opportunity to have seen in this student. So being able to first assess that, detect that, and then bring it to the parents' attention and provide them with the resources and the help that they need, that's a huge thing for a student.

Lisa Cagliostro (22:32):

For example, a student who has asthma and has noticed that it's uncontrolled with that student. Then there's things in the home environment that can be addressed. Okay, well, why is a student having so many asthma exacerbations? So, you take it to the home level, and it can change the home environment, not just for that student, but also for the others living there, so they could have other siblings. So if that's going on on a regular basis, the education and finding the resources to impact a student's environment at home even, then that can have a huge impact on the community in general.

Lisa Cagliostro (23:08):

I haven't had much opportunity to do this yet as a school nurse, but I think there are opportunities to have maybe some more informal classes for parents even. I mean, I know that already happens. There's connection with the local hospital near where I work and I know they do these classes, and so I have actually been able to send that information out to teachers too, whether it's parenting classes or just general health topics.

Lisa Cagliostro (23:34):

So these go out, and right now they're virtual of course, but I have been able to distribute these to teachers who can send them to parents, and hopefully these parents can utilize these virtual classes and they could be helpful to

them. I know, like I was saying, one of the nurses in my district has had the opportunity to teach virtually as well different courses to different groups of people, and one was a basic first aid for parents. So, school nurses do have those different opportunities to directly impact the education of the community of these parents.

**Lisa Cagliostro (24:06):**

So even with some research I've done, I've been working on my master's degree, and I've been doing some research regarding asthma and students with asthma and just the potential to have a school program for students that have asthma and just the change that that has made in their lives. It has decreased on the amount of emergency calls that have been made during the school day. Students have reported that their asthma is more controlled, they haven't needed to use their rescue medication as much, because they've been able to follow this program and they're being more closely monitored and educated. So, school nurses can definitely have that far-spreading impact into the community, not just within their school.

**Jim Cagliostro (24:49):**

Great. Well, I think that's all the time we have, and I just want to say thank you for giving our listeners an inside look at the role of the school nurse. Also, I think it's great to highlight the opportunity that exists in terms of community health. You know, Lisa, that I'm big on preventative health. While it might not get the most attention or the most glory or the most funding, it's so important in terms of instilling good healthy habits in the children that you work with, but also working with parents, like you said, connecting them with resources.

**Jim Cagliostro (25:20):**

There's so many things that you do in terms of your role as a school nurse, and I just thank you for sharing a little bit of that what you've been experiencing.

Thank you, Lisa, for being on the show today. Thank you to our listeners, thank you for anyone who spent time with us today.

Jim Cagliostro (25:35):

If you have any questions about VIE or you want to reach out to me, I'm on LinkedIn. Lisa is also on LinkedIn. Remember that we at VIE love helping hospitals save money, and we're hoping that the show today was helpful, insightful, and maybe provided some thoughts or ideas for you that you can take and use in your own organization. So Lisa, once again, thank you for spending the time with us today.

Lisa (25:58):

Thanks for having me.

Outroduction (25:59):

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The Healthcare Leadership Experience Radio Show is the think differently communication for healthcare leaders. And we are honored to have you tune in. Join us next week for another episode of The Healthcare Leadership Experience Radio Show.

## MEET JIM CAGLIOSTRO

“Healthcare in this country is very complex. We cannot succeed or move forward unless we are willing to work together to achieve better patient outcomes.”

James joined VIE Healthcare Consulting in 2018 and brings to the role over a decade of critical care nursing experience at highly regarded medical facilities across three states. During that time, he observed both the ‘good and bad’ of hospital operations in a number of regions, giving him a unique insight and understanding which he brings to our clients. That insight means he prioritizes patient care.



He has observed for himself and throughout his career that hard work makes a tangible difference in the lives of patients. While at Stanford, he was extensively involved in training staff on patient care with Ventricular Assist Devices and Total Artificial Hearts, which reinforced the importance of education and preparation in order to excel.

It is this, coupled with his experience at the bedside in reputable facilities, that has prepared him to be flexible and work on a ‘patient first’ basis. Underpinning that drive for meeting patient needs is an understanding of the critical requirements for clear and direct communication within and between healthcare organizations.

James has a BSc in Nursing from Messiah College and a Master’s in Health Education from Penn State. He also has 7 years of critical care experience at Hershey Medical Center (PA) and Stanford Hospital & Clinics (CA) and 3 years of PACU/perioperative/surgery center experience in NJ.