

December 2023

Office of Integrated Health Supports Network

The Office of integrated Health – Health Supports Network Regional Community Nursing Meetings

“A safe space for nurses to discuss challenges, experiences, and ask questions.”

Goals:

- To ensure individuals with intellectual and developmental disabilities are receiving needed services.
- To provide a forum in which nurses (and others) can discuss ideas, challenges, policy needs (e.g., health policies, which affect individuals with IDD, to bring policy needs forward.
- To provide a forum for caregivers to interact with state agency representatives, to express concerns, develop educational tools and resources, and further enhance train-the-trainer models.

Region 1 – December 6, 2023

10am -12:00pm

<https://events.gcc.teams.microsoft.com/event/01654b0b-ebb2-4c62-be8a-e6cb338dab13@620ae5a9-4ec1-4fa0-8641-5d9f386c7309>

Community Nurse Leader:

Kevyn Burn- kburn@wallresidences.com

December Meetings Dates

**Regional Nursing Meetings
will continue to be held
virtually until further notice.
Hybrid meetings are
currently in the planning
process for each region.**

Region 4 – December 11, 2023

11am - 1:00pm

<https://events.gcc.teams.microsoft.com/event/20876730-c63e-40b2-b37f-9b3a96bff8a9@620ae5a9-4ec1-4fa0-8641-5d9f386c7309>

Community Nurse Leader:

Jeannette Gholson- jgholson.thc@gmail.com

Region 2 – December 20, 2023

10am - 12:00pm

<https://events.gcc.teams.microsoft.com/event/48e881bb-8f97-434e-bade-ef72932435ee@620ae5a9-4ec1-4fa0-8641-5d9f386c7309>

Community Nurse Leader:

Beatrice Claiborne - bclaiborne@mycri.org

Region 3 – December 15, 2023

10am - 12:00pm

<https://events.gcc.teams.microsoft.com/event/b3a32c6b-c863-40e9-9613-2420b3c67355@620ae5a9-4ec1-4fa0-8641-5d9f386c7309>

Community Nurse Leader:

Teresa Berry - mtb1@aol.com

Region 5 – December 18, 2023

10am - 12:00pm

<https://events.gcc.teams.microsoft.com/event/0f8b719e-d508-4af7-be13-543ac511f8b5@620ae5a9-4ec1-4fa0-8641-5d9f386c7309>

Community Nurse Leader: Marcia A. Lindsay-

Brothers - mbrothers@chesapeakeibh.net

December 2023 Meeting Agenda

Virtual Meeting Platform:

- As of November 1st, 2023, the Regional Nursing Meetings will be conducted in the Microsoft Office TEAMS Webinar virtual platform. Registration will continue to be required to receive the meeting URL link, password, and phone access to each meeting. Registering using the URL link prior to the meeting date is recommended to avoid technical issues the day of the meeting. Tentative hybrid meetings are in the planning stages for each region which will be discussed and announced at each regional meeting.

Presentation:

- This month the RNCCs will be sharing a special edition handout which highlights fun community holiday events for individuals to attend in each region, which are either free or very low-cost. We've included links, directions and all the information you need to keep everyone busy and entertained throughout the holiday season!

Issues and Concerns Relevant to each Region:

- Each meeting is designed to have built in time for open group discussion. Your volunteer regional community nursing leader, and the regional OIHSN RNCCs are both available to help with specific issues or concerns you might be facing. Feel free to reach-out to either and/or both of them for assistance outside of the meeting. Networking within the meeting is meant to be safe and supportive for those providing care to individuals with IDD to seek answers to their questions.

Monthly CNE Opportunity: OIH - HSN Health & Safety Alert Review and Discussion:

- There will be no CNE for the month of December 2023. The next CNE will be offered in January 2024. To receive 1 **FREE CNE**, you must attend the meeting and return the quiz/evaluation by email, fax, or text. Just scan or take a picture of your completed quiz with your smart phone, and text or email it to your regional RNCC, with your name and email address clearly displayed. Your CNE certificate will be emailed directly to you.

NOTE: Anyone can attend the Regional Nurses Meeting of their choice. You do not have to attend the Regional Nursing Meeting where you work or

The Office of Health & Safety Network Supports (HSNS) Registered Nurse Care Consultants

Tammie Williams: Community Nursing Education Lead- tammie.williams@dbhds.virginia.gov

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Office of Integrated Health Supports Network

Respiratory Syncytial Virus (RSV) Vaccine



The Respiratory Syncytial Virus (RSV) is a common respiratory virus which typically causes mild, cold-like symptoms in people of all ages.

RSV spreads through direct contact with the virus, such as droplets from another person's cough or sneezes. It can also be spread by touching a surface contaminated with the virus, like a doorknob or light switch, then touching the face before washing the hands.

Symptoms of RSV infection can include runny nose, reduced appetite, coughing, sneezing, fever, or wheezing. In very young infants, symptoms may also include increased fussiness, decreased activity, or apnea which is a pause in breathing that may last 10 seconds or more.

When infected with RSV the average person typically will recover in a week or two. In some individuals RSV symptoms can increase to include shortness of breath and low oxygen levels. It can develop into bronchiolitis or pneumonia, along with worsening symptoms of asthma, chronic obstructive pulmonary disease (COPD), or congestive heart failure (CHF).

Older adults and infants who get very sick from RSV may need to be hospitalized. Some may even die. The RSV vaccine can prevent lower respiratory tract disease caused by RSV and improve outcomes.

The CDC recommends adults 60 years of age and older have the option to receive a single dose of RSV vaccine, based on discussions between the individual and their primary care provider (PCP).

The CDC recommends a single dose of RSV vaccine for pregnant women from week 32 of pregnancy for the prevention of RSV disease in infants under 6 months of age; 1 dose for all infants aged 8 months and younger; 1 dose for infants and children aged 8–19 months who are at increased risk for severe RSV disease.

Before administering the vaccine the individual's PCP should be made aware of any past allergic reactions after a dose of vaccine, along with any other severe, life-threatening allergies.

Common vaccine reactions may include pain, redness, and swelling at the injection site, fatigue, fever, headache, nausea, diarrhea, and muscle or joint pain.

If there are signs of a severe allergic reaction (hives, swelling of the face and throat, difficulty breathing, a fast heartbeat, dizziness, or weakness) after receiving any vaccine, call 9-1-1 and get the individual to the nearest hospital. Severe allergic reactions to vaccines should be reported to the individual's PCP.

Reference
[Centers of Disease Control and Prevention \(CDC\) \(2023, October\). Respiratory Syncytial Virus \(RSV\) Vaccine VIS. RSV Vaccine: What You Need to Know. 1-3.](#)

Remember To Check All Alarms & Detectors



In order to reduce life threatening emergencies it's essential for caregivers and individuals to practice fire safety. An important part of safety is checking smoke alarms and carbon monoxide (CO) detectors batteries regularly along with actively practicing fire evacuation routes.

The National Fire Prevention Association (NFPA) suggests everyone be familiar with the sound of each alarm when it goes off as to be prepared when it is heard.

When a smoke alarm detects smoke or fire it sends out three consecutive loud beeps – beep, beep, beep. When this sound is heard everyone should evacuate the home within 7 minutes or less, call 911, and do not return into the home for any reason until allowed by the fire department.

Many homes are now being equipped with Carbon monoxide (CO) detectors along with smoke alarms. CO is a deadly gas which cannot be seen or smelled. When CO is detected in the home it sends out four consecutive loud beeps – beep, beep, beep, beep. When this alarm is heard everyone should evacuate the home immediately and as quickly as possible, call 911, and no one should return back into the house for any reason.

If short chirping sounds are heard every 30 to 60 seconds from either the smoke alarm or the CO detector this means the battery needs to be replaced. If the battery has been replaced and the chirping sound continues than it's time to replace the smoke alarm or CO detector. CO detectors also have a sound that indicates it needs to be replaced which varies per manufacture. The NFPA recommends smoke alarms be replaced every 10 years.

If there are several alarms in the home one alarm will typically trigger all of them to sound in the home. A single faulty alarm can activate all the alarms. Checking each alarm or detector to verify they are all in working order, and everyone in the home to be familiar with the alarm sound is a crucial part of remaining safe.

Reference
[Mahoney, S. \(2022, February\). Smoke alarm troubleshooting. National Fire Protection Association \(NFPA\). 1-6.](#)

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