

# BACK TO SCHOOL

*Student and Home School,  
always in touch*



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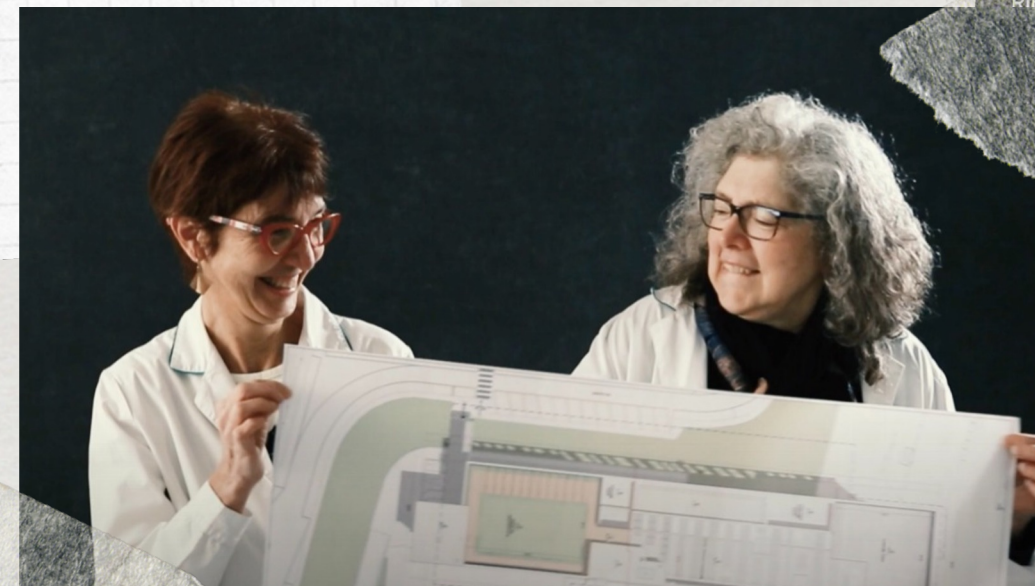
Centro  
Maria Letizia Verga

PER LO STUDIO E LA CURA DELLA LEUCEMIA DEL BAMBINO

# Patients

We take care of patients affected by hematologic diseases who undergo therapy either hospitalized or in day hospital for about two years.

In case of bone marrow transplantation, absence from school lasts from six to twelve months.



# *Hospital School and Therapeutic Alliance*

Education at San Gerardo Hospital in Monza began in 1988. Our school staff includes three primary school teachers, three full-time and three part-time lower secondary school teachers, one full-time and four part-time upper secondary school teachers and two teachers for children with special needs.

Doctors, psychologists, social workers, play activities coordinators and school staff are part of a multi-disciplinary team and they work closely together providing family-centred care.



# Critical Issues and Changes

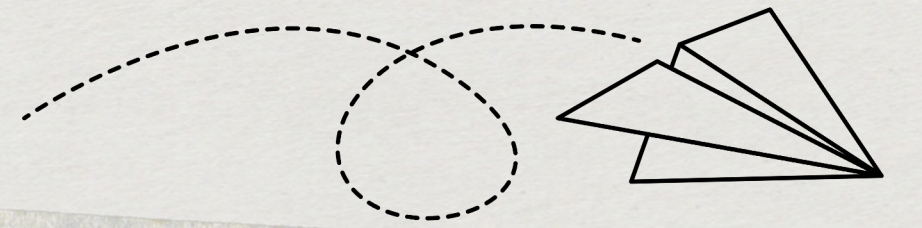
*Why change? Why  
shall we change?*



Our school has always provided for the students' re-integration, maintaining relations and keeping in touch with homeschools, since the early beginning of the disease.

- Monthly meetings and discussions with our pedagogist, we reflect on our difficult or sensitive cases.
- Several students seem to be forgotten by their homeschool.
- We need to revisit the protocol in order to improve the way we keep in touch with our students' homeschool.

# We analysed the Issue of Schools forgetting about their own Hospitalized Students:



- They lose contact with the students and their families.
- Sometimes they do not give any school program and documents and if they do, it is behind schedule.
- They outsource every school problem to the Hospital school.
- They do not enable Homeschooling (lack of funds, lack of willing teachers, teachers who refuse to have the required vaccinations).
- Some teachers are afraid of the disease.
- They are not able to involve and interact with schoolmates and their families.

# Changes in the context



- Increasing number of patients to treat.
- Increasing number of patients who come from far away.
- Changes in therapeutic protocols for disease which has resulted in longer periods of school absence.
- Patients' new protection needs, which means that every health worker, who gets in touch with the patient, must be vaccinated.
- Social media and new technologies allow quicker information, which is often misleading and not clear.

**Childhood malignant  
hemopathies treatments  
break school experiences**

- disrupted  
social and cognitive  
development
- sense of isolation



Ensuring contact with  
classmates

Supporting transition from  
treatment back to school

# Aims

Promote **haemato-oncology literacy** in classmates and teachers

Reduce patients' **sense of exclusion** during treatment

Support a **successful transition** back to school after treatment

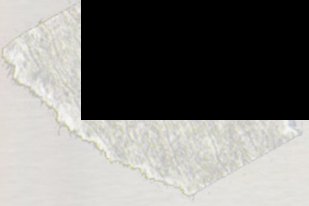
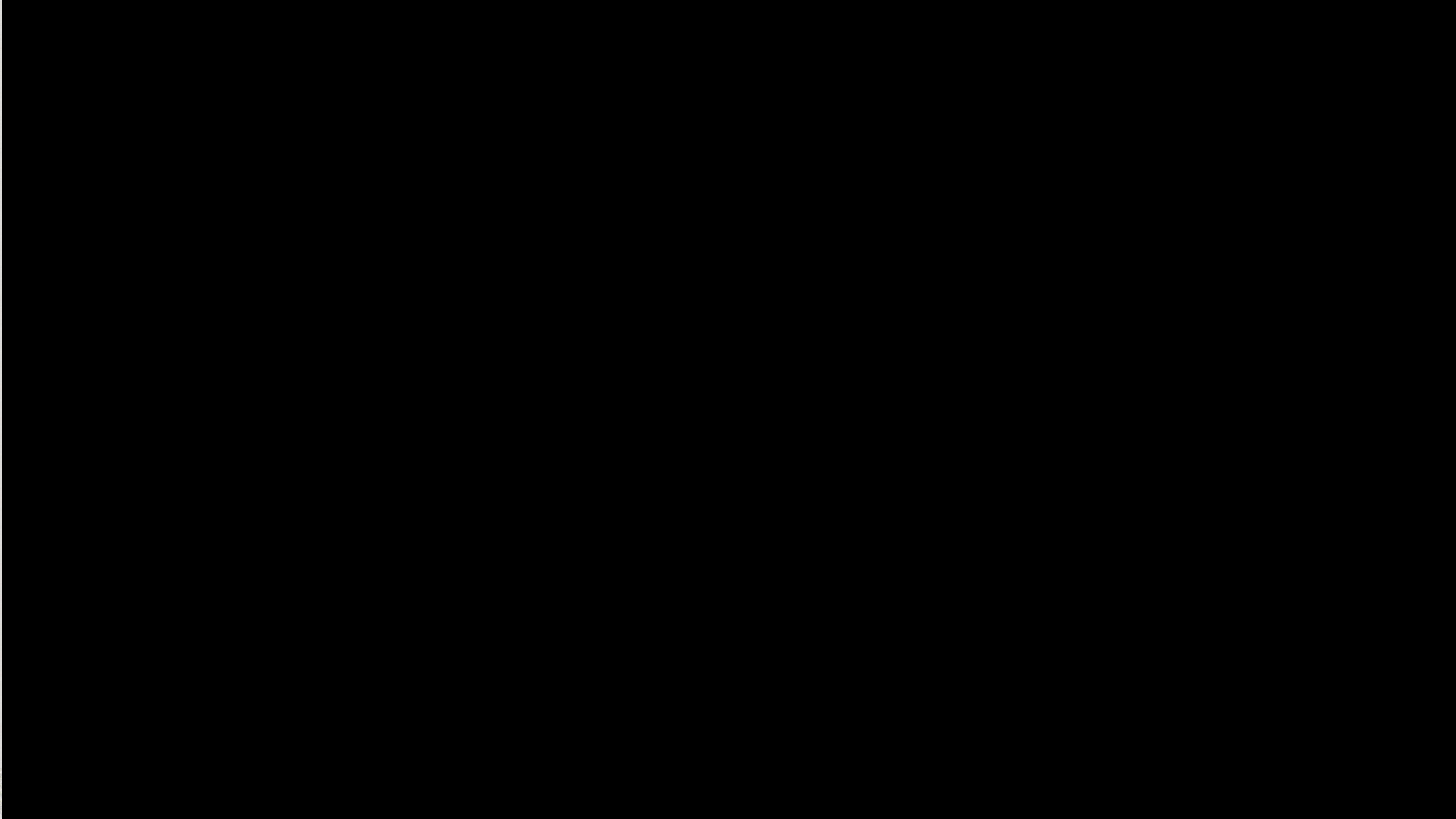


# Materials

Diagnosis Video



Hospital School  
Video



# Materials

## 'S JOURNEY

1- WHEN SHE WAS SICK, SHE WENT TO THE

2- SHE HAS A DISEASE OF THE \_\_\_\_\_ BUT YOU CANNOT CATCH IT FROM HER!

3- SHE WAS HELPED BY \_\_\_\_\_ AND

5- SHE CAN GO HOME BUT NEEDS TO GO TO THE HOSPITAL OFTEN AND STAYS THERE FOR A WHOLE DAY IN

4- SHE HAD SPECIAL THESE MEDICINES MAY MAKE HER LOSING HER HAIR, FEELING A LITTLE SICK AND TIRED.

6- SHE ATTENDS THE

7- WHEN SHE GETS BETTER, SHE CAN GO BACK TO SCHOOL WHERE SHE NEED HER

**LEGEND:** FRIENDS, DAY HOSPITAL, MEDICINES, BLOOD, HOSPITAL SCHOOL, HOSPITAL, DOCTORS & NURSES

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# Materials

Letters and postcards



# Materials

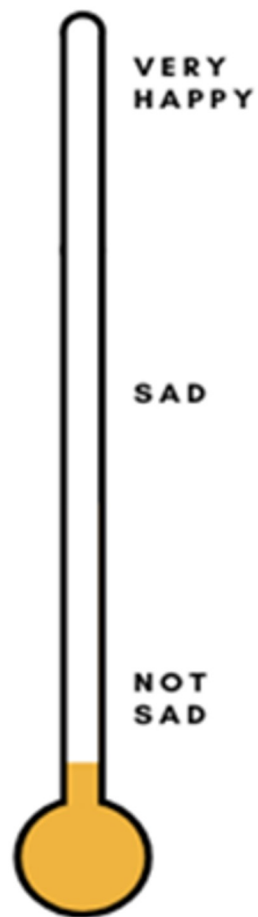
## FEELINGS THERMOMETER

how are you feeling?

HAPPY



SAD



ANGRY



WORRIED



TIRED



ANNOYED



Thermometers

# Materials

## Glossary

### glossario

**ASPIRATO MIDOLLARE:** rimozione di una piccola quantità di tessuto liquido dal midollo osseo, effettuata mediante l'uso di una siringa, generalmente dalla cresta iliaca (osso dell'anca posteriore o anteriore).

**CATETERE:** tubicino inserito nell'organismo per somministrare o asportare liquidi. Il tipo più noto è il catetere usato per drenare la vescica urinaria. Il catetere venoso centrale, invece, consta di un tubicino inserito sotto pelle per via chirurgica, che consente un facile accesso al sistema venoso, per facilitare prelievi e somministrazioni endovenose di farmaci o sostanze nutritive.



**CHEMIOTERAPIA:** termine generale che indica trattamento per mezzo di farmaci cosiddetti "antiblastici" o "antitumorali" che sono deputati alla "lisi" o distruzione delle cellule tumorali.

**EMOCROMO:** esame del sangue eseguito per determinare il numero dei globuli rossi, dei globuli bianchi e delle piastrine per mm cubo, la formula leucocitaria e il contenuto in emoglobina dei globuli rossi.

**IMMUNOSOPPRESSIONE:** il deficit o la compromissione dell'immunità cellulare e umorale in seguito alla chemioterapia o al trapianto di midollo osseo.

**MIDOLLO OSSEO:** materiale spugnoso liquido presente nelle cavità delle ossa, dove avviene la produzione delle cellule del sangue. Si tratta di cellule a crescita rapida che sono particolarmente sensibili alla chemioterapia.

**PALLIATIVO:** si dice di un medicamento che lenisce i sintomi tossici della chemio-radioterapia e quindi ha un'azione di supporto.

**PROTOCOLLO:** programma formale di terapia, preciso e particolareggiato.

**PUNTURA LOMBARE (RACHICENTESI):** iniezione praticata nella zona lombare bassa della colonna spinale per fini diagnostici o/e per somministrare farmaci.

**REMISSIONE:** assenza di tracce identificabili della malattia.

**RICADUTA:** ricomparsa della malattia tumorale dopo un periodo di remissione.

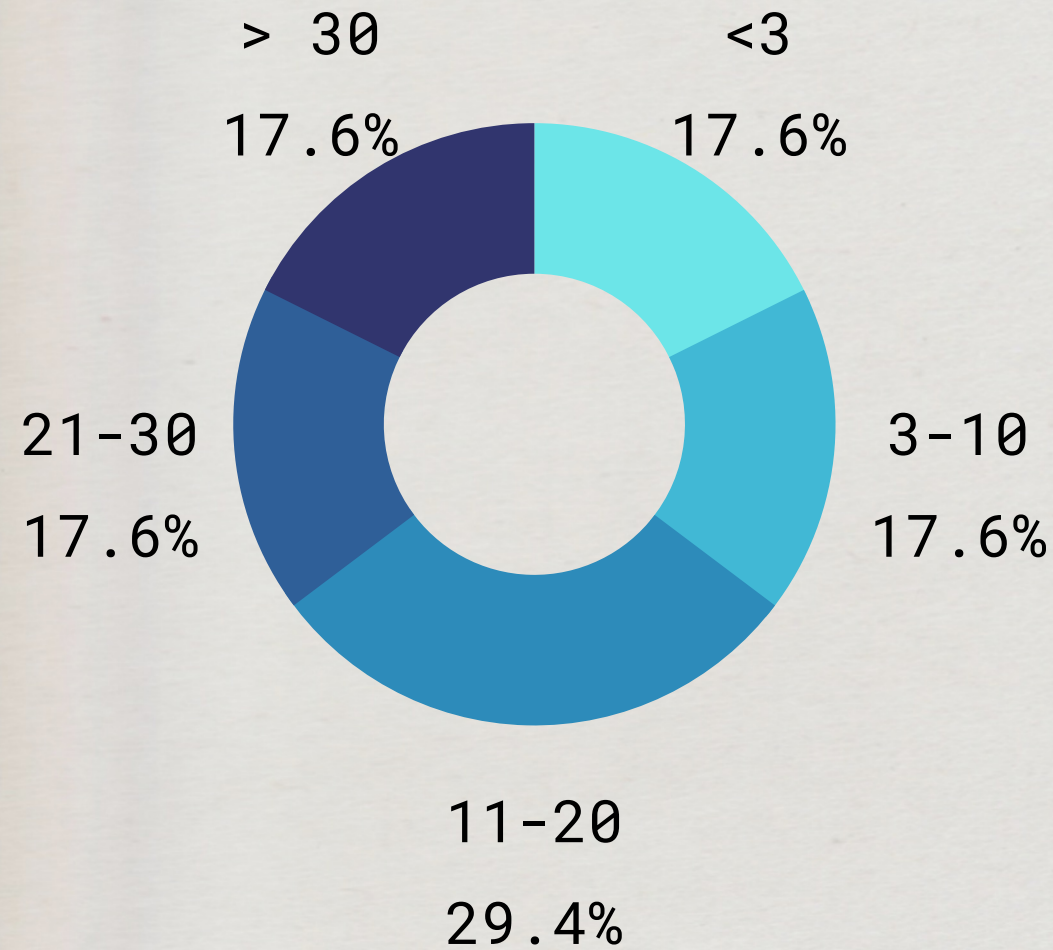
**STOMATITE:** infiammazione delle mucose della bocca con conseguenti lesioni.

**TRAPIANTO DI MIDOLLO:** procedura con la quale si infonde al paziente, dopo chemio e radio terapie intensive, il sangue midollare di un donatore.

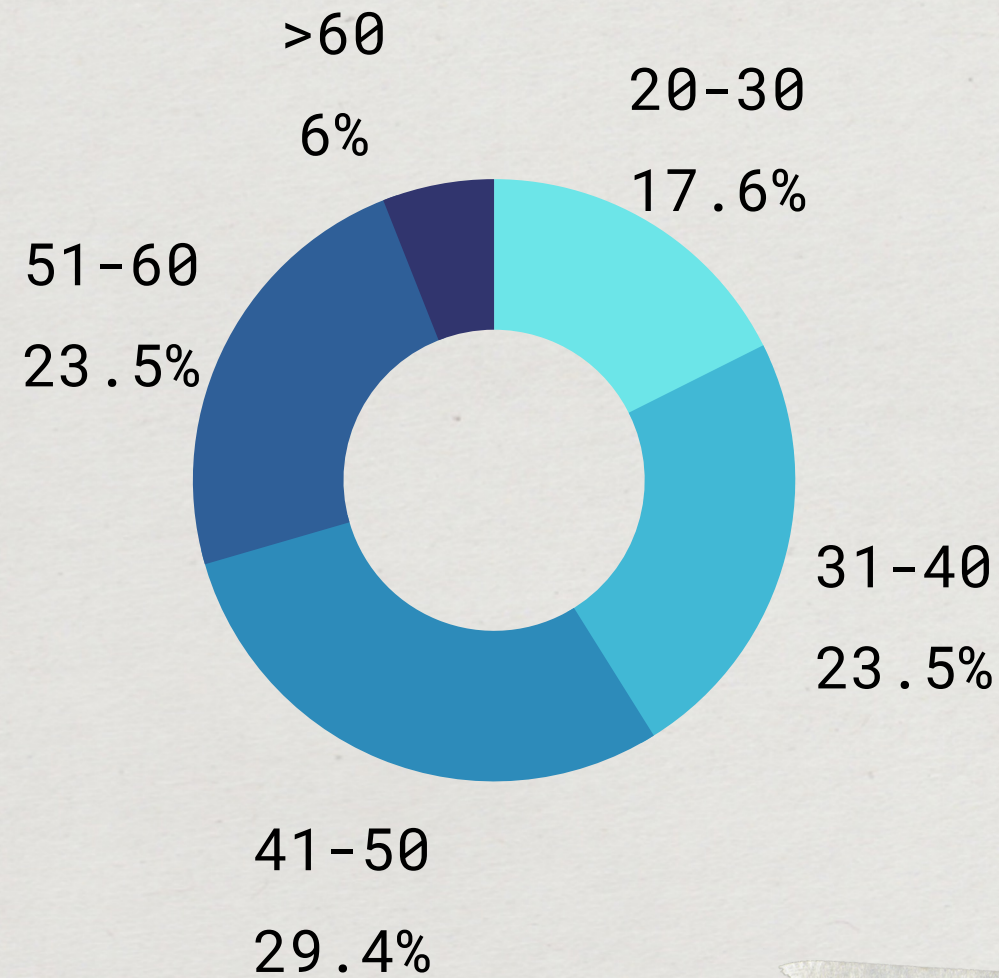
# Participants

Response rate = 53%

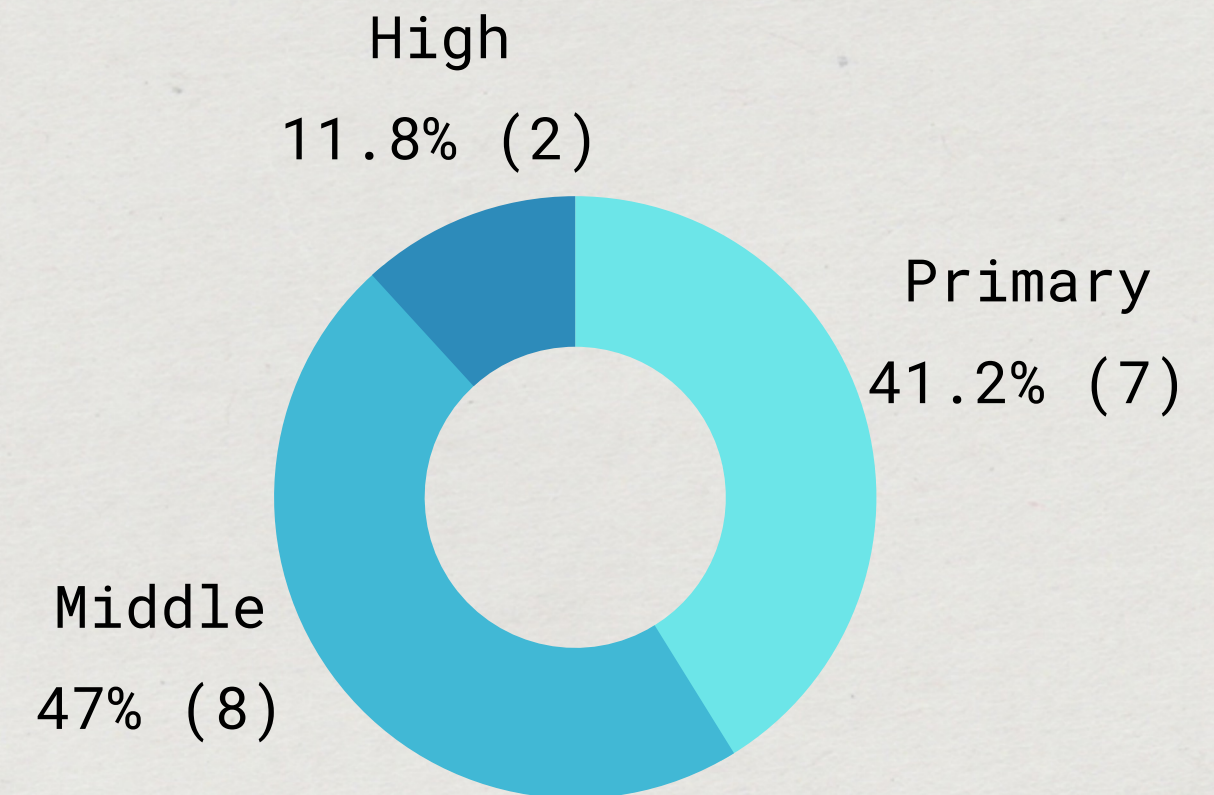
## Professional Seniority



## Age



## School type



Male: 11.8%  
Female: 88.2%

<20: 17.6%  
21-25: 88.4%

N=17

# Results

## Diagnosis Video



Scale: 1-not at all to 10-extremely

- Helpful in explaining the disease

M=8.70 (Min=7, Max=10)

- Understanding by students

M=8.76 (Min=6, Max=10)

- Appropriateness of language

M=8.82 (Min=6, Max=10)

- General satisfaction

M=9.11 (Min=6, Max=10)



# Results

## Hospital School Video



Scale: 1-not at all to 10-extremely

- Helpful in understanding HS

**M=9.11** (Min=7, Max=10)

- Helpful in explaining HS to students

**M=9.11** (Min=6, Max=10)

- Appropriateness of language

**M=8.94** (Min=6, Max=10)

- General satisfaction

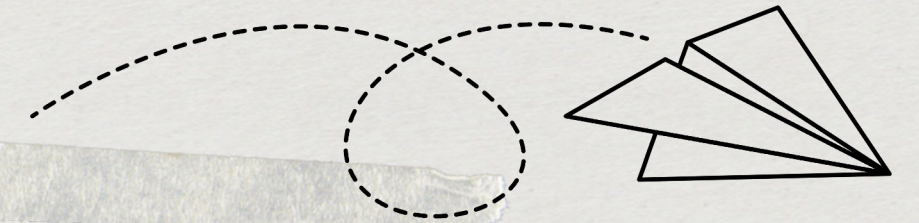
**M=9.35** (Min=6, Max=10)

# Results

## Students' questions after videos



- Disease (**76.5%**)
- Classmate medical condition (**64.7%**)
- Healing (**52.9%**)
- HS organization (**35.3%**)
- Therapies(**23.5%**)
- Possibility to contact classmate (**23.5%**)
- Death (**17.6%**)
- Tests and exams at HS (**5.9%**)



# Results



## Materials used:

- Journeys **37.5%**
- Letters and postcards **25%**
- Thermometers **12.5%**
- Not used **43.8%**

Scale: 1 to 10

General utility

**M=8.18** (Min=1; Max=10)

Support relational bond

**M=8.70** (Min=5; Max=10)

# Conclusion

-Tackling the **absence** of the ill classmate and the disease

-**Maintaining** the **link** between local schools/classmates and hospitalised children

-**Standardizing** the return-to-school of children with malignant hemopathies after treatment

# Ongoing...

- Engage teachers
- Discuss the timing for using materials/activities
- Develop new materials/activities
- Develop/adapt materials tailored for High School





Doctors:

Momcilio Jankovic

Marco Spinelli

Fabiola Dell'Acqua

Social worker:

Serena Malorni

Psychologists:

Francesca Nichelli

Emanuela Schivalocchi

Teachers:

Flavia Tarquini

Lorena Almansi

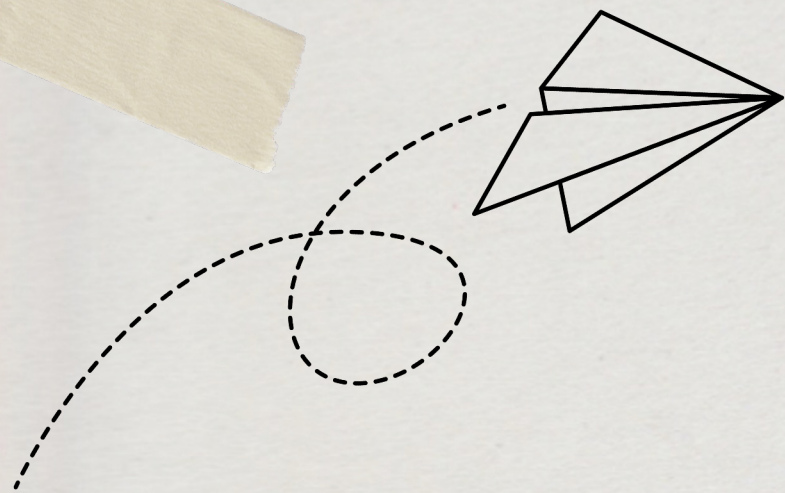
Angela Passoni

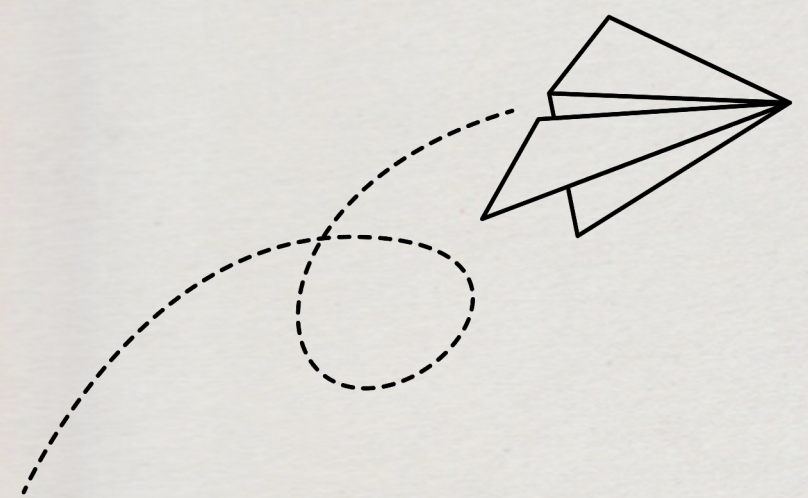
Orianna Marzi

Enrica Frigerio

Maria Rosa Maggioni

Federica Lavagnini







*Thank you!*