

Below see a list of the positions in which we have nurses working in our department.

Please note, Starlight Pediatrics (SLP) is a holistic, trauma informed primary care practice that we run for children involved in the foster care system. It is staffed primarily by Nurse Practitioners and myself as the only physician to see patients and then we have RN and LPNs to room patients, draw blood, check hearing and vision screenings, give shots, etc.

The managers of the Nursing Services and Maternal Child health services are the heads of two of the seven divisions in the department, so they run multiple programs/budgets and LOTS of grants.

WIC - the supplemental nutrition program for women, infants and children, while the formal title for many of them is Public Health Nursing Aide, many of them are actually nutritionist aids in lieu of nursing aides. They weigh children, draw finger stick blood samples to check for anemia, etc.

NFP - Nurse family partnership program - that partners home visiting nurses with low income, high risk, first time pregnant women before the 28th week of their pregnancy

The Children's Center is a juvenile detention center run by DHS. We contract with them to run the medical portion of that facility. So the nurses out there pass meds, do initial assessments on arrival, patch-up scrapes/cuts and sometimes send children to the hospital when their needs exceed our ability to safely treat out there. We have 24/7 nurse coverage there and contract with a physician in the community to sign orders and do medical assessments as well.

The Epi-Lead nurse works with families of children with an elevated blood lead level to coordinate the kid's care and help them take outpatient chelation therapy when needed (She is *amazing* and can get even the most resistant child to choke down their meds!!) She also does a lot of community health fair education about lead and other environmental health hazards.

The Imms nurses work in our immunization clinic reviewing patient immunization records (sometimes translated from other countries!), checking NYSIIS, and determining what shots a person needs and then draw them up and give them. These clinics work under standing orders reviewed annual and signed by the Commissioner of our Department, Dr. Mike Mendoza.

A subset of them also do AFIX visits to local medical practices in the community. They review the practices' immunization rates and then go to that practice and do an in-service with their staff to educate providers about best practices for getting parents to accept non-required vaccines for their children and giving any help and resources the practice might need/want.

We have an STD clinic run by nurses as well. That clinic runs under standing orders, signed by Dr. Mendoza as well.

Our TB clinic contracts with the pulmonology group at the University of Rochester Medical Center for the physician time in our clinic, otherwise it's run by nurses. We also have Community Health Workers, who are not nurses, who go out and do directly observed therapy for patients in the community to treat their latent TB.

CSCHN- Children with Special Healthcare Needs program helps parents of a child with any chronic physical, mental, behavioral problem navigate the system and get the support and resources they need to help their child succeed and flourish.