

STUDENT HEALTH SERVICES

The Board of Education recognizes that good student health is vital to successful learning and realizes its responsibility, along with that of parent(s) or guardian(s), to protect and foster a safe and healthful environment for the students.

The school shall work closely with students' families to provide detection and preventive health services. In accordance with law, the school will provide vision, hearing, and scoliosis screening. Results shall be referred to the parent(s) or guardian(s) who shall be encouraged to have their family physician/dentist provide appropriate care.

In order to enroll in school a student must have a health exam and submit a health certificate within 30 calendar days after entering school, and upon entering prekindergarten or kindergarten, and first, third, fifth, seventh, ninth and eleventh. The examination must have been conducted no more than 12 months before the first day of the school year in question. If a student is unable to furnish the health certificate, the school will provide a physical examination by a licensed provider. A request for exemption from the physical examination, or the requirement to provide a health certificate, must be made in writing to the school principal or designee, who may require documents supporting the request. The only basis for exemption is a claim that the physical examination is in conflict with the parent or guardian's genuine and sincere religious belief.

In order to enroll in school, students must also furnish documentation of required immunizations against certain communicable diseases, as set forth in state law and regulations, unless exempted from immunizations for medical reasons as permitted by state law and regulation.

Homeless students shall be admitted to school even if they do not have the required health or immunization records, but may be temporarily excluded if they show actual symptoms of a communicable disease that poses a significant risk of transmission to others (see "Communicable Diseases" below).

The Board recognizes that the State of New York may authorize and require the collection of data from health certificates in furtherance of tracking and understanding health care issues that affect children. The Board supports these efforts and expects administrators to cooperate and to observe the appropriate laws and regulations in carrying out those responsibilities, including those that relate to student privacy.

Students will be asked to provide a dental health certificate when they initially enroll and in accordance with the same schedule as the health certificate.

A permanent student health record shall be part of a student's cumulative school record and should follow the student from grade to grade and school to school along with his/her academic record. This record folder shall be maintained by the school nurse.

Emergency Care

Each school in the district will include in its emergency plan a protocol for responding to health care emergencies, including anaphylaxis, and head injury. Parents/guardians will be notified of any emergency medical situation as soon as is practicable.

Schools shall also provide emergency care for students in accidental or unexpected medical situations. Each school building will stock an epinephrine auto-injector for non-patient specific use in the nurse's office. The district shall ensure that designated staff are properly trained.

The district permits emergency administration of opioid antagonists, such as naloxone, by the school nurse, building principal and/or other personnel as authorized by the Superintendent to prevent opioid overdose after opioid antagonists have been obtained and those staff members have been trained in their use.

Communicable Diseases

It is the responsibility of the Board to provide all students with a safe and healthy school environment. To meet this responsibility, it is sometimes necessary to exclude students with contagious and infectious diseases, as defined in the Public Health Law, from attendance in school. Students will be excluded during periods of contagion for time periods indicated on a chart developed by the district in accordance with Public Health Law.

During an outbreak of these communicable diseases, if the Commissioner of Health or his/her designee so orders, the district will exclude students from school who have an exemption from immunization or who are in the process of obtaining immunization.

It is the responsibility of the Superintendent of Schools, working through district health personnel, to enforce this policy and to contact the county or local health department when a reportable case of a communicable disease is identified in the student or staff population.

Administering Medication to Students

Neither the Board nor district staff members shall be responsible for the diagnosis or treatment of student illness. The administration of prescribed medication to a student during school hours shall be permitted only when failure to take such medicine would jeopardize the health of the student, or the student would not be able to attend school if the medicine were not made available to him/her during school hours, or where it is done pursuant to law requiring accommodation to a student's special medical needs (e.g., Section 504 of the Rehabilitation Act of 1973). "Medication" will include all medicines (whether over-the-counter or prescription) as prescribed by an authorized medical provider.

Before any medication may be administered to or by any student during school hours, the Board requires:

1. the written request of the parent(s) or guardian(s), which shall give permission for such administration and relieve the Board and its employees of liability for administration of medication; and

2. the written order of the prescribing authorized medical provider, which will include the purpose of the medication, the dosage, the time at which or the special circumstances under which medication shall be administered, the period for which medication is prescribed, and the possible side effects of the medication.
3. that in order for a student to carry and use a rescue inhaler, an epinephrine auto-injector, insulin, or glucagon and associated testing supplies, written permission must be provided both by the parent and the prescribing authorized medical provider in accordance with state law and regulation.

Permission slips and medical orders shall be kept on file in the office of the school nurse.

Students are allowed to carry and apply parentally provided sunscreen without a prescription from a medical provider, assuming that the sunscreen is FDA approved and that the sunscreen is not treating a medical condition. Parents need to provide the district with written permission for students to use sunscreen.

Life-Threatening Allergies

Upon notification that a student has been diagnosed with a life-threatening allergy, the following steps shall be taken:

1. Parents shall provide the School Nurse with medical forms confirming the diagnosis of the life-threatening allergy from a private medical care provider.
2. Upon receipt, the School Nurse will notify school administration.
3. Information relative to the life-threatening allergy will be added to the student cumulative health record.
4. The School Nurse, in conjunction with appropriate members of the Administration, appropriate faculty, the parents and, when appropriate, the student, shall meet to discuss strategies to avoid allergens, communications with staff, and any necessary accommodations for the student.
5. The School Nurse, in conjunction with appropriate District personnel, shall write an Emergency Care Plan for the student, to be acknowledged and signed by the parents.
6. Information relative to the student's diagnosis may be shared with other staff members on a "need to know" basis.
7. On an "as needed" basis, staff shall be informed and trained on life-threatening allergies and/or on specific Emergency Care Plans.

Management of Injury

Although the district will take reasonable care to protect student athletes, students may still sustain injuries. In order to most effectively ensure student safety, open communication between students, parents and coaches about the child's medical condition is critical. Coaches, and other appropriate staff, will receive guidance and training regarding recognition of injury and

removal of the student athlete from play in the event of injury. Parents and/or students are expected to report injuries so that student health can be protected.

In order to resume participation following injury, the student needs to receive medical clearance.

Head Injuries/Concussions

The Superintendent shall develop protocols to govern concussion or head injury management. The protocols shall provide that:

- All students who have sustained a concussion must be evaluated by their private health care provider;
- The student must bring a note from the healthcare provider to the school nurse.
- The school nurse shall coordinate the progress of the student's recovery through communication with the student and parents, the student's health care provider, teachers, coaches and administrators.

District coaches and athletic trainers will be trained about concussion prevention, identification, and management.

Regulations

The Superintendent shall develop comprehensive regulations governing student health services. Those regulations shall include the provision of all health services required by law, procedures for the maintenance of health records, and procedures for the administering of medication to students. The Superintendent shall also develop protocols, in consultation with the school physician and other appropriate district staff, for the management of injury, with particular attention to concussion.

Cross Ref: 4321 Programs for Students with Disabilities Under IDEA and Article 89

5020.3 Rights of Students with Disabilities Under Section 504

Ref: Education Law §§310 (provisions for appeal of child denied school entrance for failure to comply with immunization requirements); 901 et seq. (medical, dental and health services, BMI reporting); 916 (student self-administration of rescue inhalers); 916-a (student self-administration of epinephrine); 916-b (students with diabetes); 919 (provide and maintain nebulizers); 921 (epinephrine auto-injectors; training of unlicensed personnel); 922 (naloxone); 6527 (emergency treatment: anaphylaxis; naloxone); 6909 (emergency treatment: anaphylaxis; naloxone)

Public Health Law §§613 (annual survey); 2164 (immunization requirements); 3000-c (emergency epinephrine); 3309 (naloxone)

8 NYCRR §§ 64.7 (anaphylaxis; naloxone); 135.4 (Physical Education); Part 136 (school health services program: concussion, anaphylaxis, medication, naloxone)

10 NYCRR Part 66-1 (immunization requirements); § 80.138 (naloxone)

Guidelines for Medication Management in Schools, State Education Department, September 2015, www.p12.nysed.gov/sss/documents/MedicationManagement-final2015.pdf

Immunization Guidelines: Vaccine Preventable Communicable Disease Control, State Education Department, revised August 2000

Approved: July 1, 2001,

Revised and Approved: April 16, 2003; July 7, 2008; Nov. 3, 2008; Sept. 29, 2011; Jan. 26, 2012; May 31, 2012; Nov. 21, 2013; November 16, 2017; July 21, 2018; September 19, 2019