

**STUDENT HEALTH SERVICES**

The Board of Education recognizes that good student health is vital to successful learning and acknowledges 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 will work closely with students' families to provide detection and preventive health services. In accordance with law, the school will provide vision, hearing, dental inspection and scoliosis screening. Results will be referred to the parent(s) or guardian(s) who will 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 grades. The examination, which must conform to state requirements, 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 will 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 McKinney-Vento liaison will assist homeless students covered by that law in accessing health services described in this policy and accompanying regulation, including removing barriers for unaccompanied youth caused by a lack of parent/guardian permission.

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.

In addition, students will be asked to provide a dental health certificate when they enroll in school and in accordance with the same schedule as the health certificate.

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

**STUDENT HEALTH SERVICES***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. Parents/guardians will receive notification of non-emergent medical situations that have been reported to the nurse in a timely manner.

Schools will also provide emergency care for students in accidental or unexpected medical situations. The district will stock epinephrine auto-injectors for non-patient specific use. The district will ensure that designated staff are properly trained.

The district permits emergency administration of opioid antagonists, such as naloxone, by trained volunteer responders and/or the school nurse to prevent opioid overdose.

*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 who have been diagnosed with or are showing symptoms of any 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 school nurse or the district's medical director.

During an outbreak of these communicable diseases, if the Commissioner of Health or 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. The district will provide additional protections to students who are otherwise medically vulnerable.

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, such as COVID-19.

*Administering Medication to Students*

Neither the Board nor district staff members are responsible for the diagnosis or treatment of student illness. The administration of prescribed medication to a student during school hours will 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 them 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 prescribed by an authorized medical provider.

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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 gives permission for such administration and relieve the Board and its employees of liability for administration of medication;
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 will be administered, the period for which medication is prescribed, and the possible side effects of the medication; and
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.

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.

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

*Life-Threatening Allergies and Anaphylaxis Management*

The Board recognizes its role and responsibility in supporting a healthy learning environment for all students, including those who have, or develop, life-threatening allergies. The district will work cooperatively with the student, their parent/guardian and healthcare provider to allow the child to participate as fully and as safely as possible in school activities. When a student has a known life-threatening allergy reported on their health form or if the district has been informed by the parent of the presence of a life-threatening allergy, the district will assemble a team, which may include the parent, the school nurse, the child's teacher, the building principal and other appropriate personnel, which will be charged with developing an individual health care plan and/or an emergency action plan. The plan(s) will be maintained by the school nurse. The plan(s) will guide prevention and response. If the student is eligible for accommodations based upon the IDEA, Section 504 or the Americans with Disabilities Act, the appropriate procedures will be followed regarding identification, evaluation and implementation of accommodations.

*Training*

Training to support the fulfillment of staff responsibilities in regard to student health services will be provided as part of the district's ongoing professional development plan and in conformity with Commissioner's regulations.

*Regulations*

The Superintendent will develop comprehensive regulations governing student health services. Those regulations will include the provision of all health services required by

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law, procedures for the maintenance of health records, and procedures for the administering of medication to students. The Superintendent will also develop protocols, in consultation with the district medical director and other appropriate district staff, for the management of injury, with particular attention to concussion.

- Cross-ref: 4321-Programs for Students with Disabilities  
 5020.3-Students with Disabilities and Section 504  
 5151-Homeless Students  
 5280-Interscholastic Athletics  
 5405-District Wellness  
 5550-Student Privacy  
 8121.1-Opioid Overdose Prevention  
 8130-School Safety Plans and Teams  
 9700-Staff Professional Development

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, December 2017, [www.p12.nysed.gov/sss/documents/MedicationManagement-DEC2017.pdf](http://www.p12.nysed.gov/sss/documents/MedicationManagement-DEC2017.pdf)  
*Immunization Guidelines: Vaccine Preventable Communicable Disease Control*, State Education Department, revised August 2000  
*Making the Difference: Caring for Students with Life-Threatening Allergies*, New York State Department of Health, New York State Education Department, New York Statewide School Health Service Center, June 2008  
*Concussion Management Guidelines and Procedures*, [www.nysphsaa.org](http://www.nysphsaa.org)  
*New Policy for Stocking Albuterol Metered Dose Inhalers (MDIs)*, State Education Department, August 2011, [www.p12.nysed.gov/sss/schoolhealth/schoolhealthservices/Albuterol2011memo.pdf](http://www.p12.nysed.gov/sss/schoolhealth/schoolhealthservices/Albuterol2011memo.pdf).

<b>Approved by the Board of Education:</b>	<b>06/17/10</b>
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