

ARTICLE V: STUDENT HEALTH

TABLE OF CONTENTS

Policy

7-5.1 SAFETY

7-5.2 STUDENT INSURANCE

7-5.3 COMMUNICABLE DISEASES

7-5.4 BLOOD BORNE CONTAGIOUS OR INFECTIOUS DISEASES

7-5.5 ADMINISTERING MEDICINES TO STUDENTS

7-5.6 PSYCHOLOGICAL EVALUATION AND SURVEYS OF STUDENTS

7-5.7 CHILD ABUSE AND NEGLECT REPORTING

7-5.8 BUS AND SAFETY PATROLS

7-5.9 SUICIDE PREVENTION

7-5.10 ANNUAL SCREENING FOR SCOLIOSIS

7-5.11 LOCAL SCHOOL WELLNESS POLICY

7-5.12 INFORMATION REGARDING EATING DISORDERS

7-5.13 STUDENT LACTATION SUPPORT

7-5.14 STUDENT MENSTRUAL SUPPLIES

7-5.15 TOPICAL SUNSCREEN

POLICY 7-5.1 SAFETY

Generally

A primary consideration in all student activities and classes shall be the safety of the student. Poquoson City Public Schools shall comply with the Code of Virginia requirements in matters relating to health, physical examinations, inoculations, and safety issues. Interpretations of any such regulations shall be sought from the local department of health.

Accident Prevention

Poquoson City Public Schools' students shall be instructed properly in accident prevention including proper conduct on streets and highways, the operation of motor vehicles and fire prevention.

Classes

Students shall be carefully supervised at all times and extreme caution should be exercised in those classes where machinery or chemicals are used or in use. Protective eye devices shall be worn where required by law and in instances where any danger to the eyes of the student might be present.

Outside the Classroom

Extreme care shall be taken that all equipment or grounds used by the students are free from hazardous conditions.

LEGAL REFERENCE: Code of Virginia, 1950, as amended, §§ 22.1-135, 22.1-136, 22.1-204, 22.1-274.1, and 22.1-275.

Adopted: November 2002

POLICY 7-5.2: STUDENT INSURANCE

The division superintendent or his/her designee shall make available, through each school, student accident and dental insurance programs covering accidents occurring during the time students are under the supervision of school personnel. The insurance is voluntary on the part of students and parents, and they shall pay the premium.

The division superintendent or his/her designee shall elect annually a company to provide such insurance. Criteria for the selection of such insurance company shall include, but not be limited, to cost, service and other specifications judged to be of importance. The amount of staff time invested in this program shall be kept to a minimum.

Adopted: November 2002

POLICY 7-5.3: COMMUNICABLE DISEASES

Poquoson City Public Schools recognizes the importance of protecting its students and employees from the transmission of communicable diseases which represent a threat to their health and safety, while also protecting the legitimate interests and rights of students and employees with communicable diseases. In carrying out this responsibility, the Poquoson City School Board directs the division superintendent to act in compliance with applicable law to exclude from school attendance any person who has a communicable disease. Both the decision to remove the student or employee and the decision to readmit the student or permit the employee to return to work shall be made by the division superintendent based upon consultation with the local health department, the student's or employee's physician nurse practitioner and/or other medical authorities. See Policy 7-2.1.

The identity of a student who has a communicable disease will be kept confidential and will be revealed only in accordance with state law. An alternative educational program should be made available to any student whose removal pursuant to this policy is expected to result in a prolonged absence from school or where otherwise required by law.

Administrative procedures concerning the exclusions of employees and students with communicable diseases will be consistent with the requirements of law, including the policies of the Virginia Department of Education, and should reflect current medical knowledge and research.

Upon notification by a school employee who believes he/she has been involved in an incident which may have exposed the employee to the blood or body fluids of a student, the division superintendent shall contact the local health department director who, upon immediate investigation of the incident, shall determine if a potentially harmful exposure has occurred and make recommendations based upon all information available to him/her regarding how the employee can reduce any risks from such exposure. The division superintendent shall share these recommendations with the school employee. The division superintendent and the school employee shall not divulge any information provided by the local health director regarding the student involved except as described elsewhere in this policy and Policy 7-5.4. The information provided by the local health director shall be subject to any applicable confidentiality requirements set forth in applicable law, including in Virginia Code §32.1-35, et seq.

LEGAL REFERENCE: Code of Virginia, 1950, as amended, §§ 22.1-271.3, 22.1-271.4, 22.1-272, 32.1-35, et seq., 54.1-2957.02.

Adopted: November 2002

Revised: July 2003, July 2005

POLICY 7-5.4 BLOOD BORNE CONTAGIOUS OR INFECTIOUS DISEASES

The attendance at school of Poquoson City students who suffer from blood borne diseases which are infectious or contagious, such as AIDS and Hepatitis B, and which may be transmitted by the exchange of body secretions, shall be determined by the division superintendent on a case-by-case basis. The division superintendent shall obtain the advice of the local department of health to assist him in making his determination. The student may be excluded from school and school-related functions pending the division superintendent's decision. The division superintendent shall issue regulations setting forth the procedures to be followed to effectuate this policy. See Policy and Regulation 7-2.1.

The identity of a student who has tested positive for human immunodeficiency virus shall be confidential in accordance with state law.

An alternative educational program shall be made available to any student whose removal pursuant to this policy is expected to result in a prolonged absence from school or where otherwise required by law.

Training in the use of universal precautions for handling blood shall be conducted periodically in accordance with state and federal law. Universal precautions for handling blood shall be implemented within the school setting and on buses in accordance with state and federal law and guidelines. See Regulation 7-2.1.

The School Board shall adopt guidelines for school attendance for children with human immunodeficiency virus. Such guidelines shall be consistent with the model guidelines for such school attendance developed by the Board of Education.

Whenever any School Board employee is directly exposed to body fluids of any person in a manner which may, according to current guidelines of the Centers for Disease Control, transmit human immunodeficiency virus or Hepatitis B or C viruses, the person whose body fluids were involved in the exposure shall be deemed to have consented to testing for infection with human immunodeficiency virus or Hepatitis B or C viruses. Such person shall also be deemed to have consented to the release of such test results to the School Board employee who was exposed. If the person whose blood specimen is sought for testing is a minor, the parent, guardian, or person standing in loco parentis of such minor shall be notified prior to initiating such testing. In other than emergency situations, it shall be the responsibility of the School Board employee to inform the person of this provision prior to the contact that creates a risk of such exposure.

If the person to be tested is a minor, and that minor refuses to provide such specimen, consent for such testing shall be obtained from the parent, guardian, or person standing *in loco parentis* of such minor prior to initiating such testing. If the parent or guardian or person standing *in loco parentis* withholds such consent, the School Board may petition the juvenile and domestic relations district court in the city of county where the minor resides for an order requiring such testing.

Whenever any person is directly exposed to the body fluids of a School Board employee in a manner that may, according to the then current guidelines of the Centers for Disease Control, transmit human immunodeficiency virus or Hepatitis B or C viruses, the School Board employee whose body fluids were involved in the exposure shall be deemed to have consented to testing for infection with human immunodeficiency virus or Hepatitis B or C viruses. The School Board employee shall also be deemed to have consented to the release of such test results to the person.

Except if the person to be tested is a minor, if the person whose blood specimen is sought for testing refuses to provide such specimen, any person potentially exposed to the human immunodeficiency virus or Hepatitis B or C viruses, or the School Board as employer of such person, may petition the general district court of the city or county in which the person whose specimen is sought resides or resided, or, in the case of a nonresident, the York County General District Court, for an order requiring the person to provide a blood specimen or to submit to testing and to disclose the test results in accordance with this policy. At any hearing before the Court, the person whose specimen is sought or his counsel may appear. The Court shall be advised by the State Health Commissioner or his designee prior to entering any testing order. If a

testing order is issued, both the petitioner and the person from whom the blood specimen is sought shall receive counseling and opportunity for face-to-face disclosure of any test results by a licensed practitioner or trained counselor.

LEGAL REFERENCE: Code of Virginia, 1950, as amended, §§ 22.1-272, 22.1-271.4, 32.1-35, et seq.

Adopted: November 2002

Revised: July 2003, July 2005, July 2015

POLICY 7-5.5 ADMINISTERING MEDICINES TO STUDENTS

Prescription Medicines

Poquoson City Public Schools personnel may give prescription medication to children only pursuant to the written order of a physician or nurse practitioner and with a signed request from a parent or guardian. Such medicine must be in the original container and delivered to the principal, school nurse or school division designee by the parent or guardian of the student.

Administration of Epinephrine

Pursuant to an order or standing protocol issued by the prescriber within the course of his professional practice, any school nurse, School Board employee, employee of a local governing body, or employee of a local health department who is authorized by a prescriber and trained in the administration of epinephrine, may possess and administer epinephrine to any student believed to be having an anaphylactic reaction, in accordance with the "Virginia School Health Guidelines." Any school nurse, School Board employee, employee of a local governing body, or employee of a local health department authorized by a prescriber and trained in the administration of epinephrine, who provides, administers, or assists in the administration of epinephrine to a student believed in good faith to be having an anaphylactic reaction, or is the prescriber of the epinephrine, shall not be liable for any civil damages for ordinary negligence in acts or omissions resulting from the rendering of such treatment. At least one school nurse, School Board employee, employee of a local governing body, or employee of a local health department who is authorized by a prescriber and trained in the administration of epinephrine shall have the means to access at all times during regular school hours any such epinephrine that is stored in a locked or otherwise generally inaccessible container or area.

Administration of Albuterol

Pursuant to an order or standing protocol issued by the prescriber within the course of his professional practice, any school nurse, School Board employee, employee of a local governing body, or employee of a local health department who is authorized by a prescriber and trained in the administration of albuterol inhalers and valved holding chambers or nebulized albuterol, may possess and administer an undesignated stock albuterol inhaler and valved holding chamber or nebulized albuterol to a student diagnosed with a condition requiring an albuterol inhaler and valved holding chamber or nebulized albuterol when the student is believed to be experiencing or about to experience an asthmatic crisis. Any school nurse, School Board employee, employee of a local governing body, or employee of a local health department, authorized by a prescriber and trained in the administration of albuterol inhalers and valved holding chambers or nebulized albuterol and who provides, administers, or assists in the administration of an albuterol inhaler and a valved holding chamber or nebulized albuterol for a student believed in good faith to be in need of such medication, or is the prescriber of such medication, shall not be liable for any civil damages for ordinary negligence in acts or omissions resulting from the rendering of such treatment.

Administration of Naloxone

Pursuant to an oral, written, or standing order issued by a prescriber or a standing order issued by the Commissioner of Health or his designee authorizing the dispensing of naloxone or other opioid antagonist used for overdose reversal in the absence of an oral or written order for a specific patient issued by a prescriber, any school nurse, local health department employee assigned to an PCPS school pursuant to an agreement between the local health department and the School Board, school board employee or individual contracted by the School Board to provide school health services who have completed a training program may possess and administer naloxone in accordance with protocols developed by the Board of Pharmacy to a person who is believed to be experiencing or about to experience a life-threatening opioid overdose. Any school nurse, local health department employee assigned to an PCPS school pursuant to an agreement between the local health department and the School Board, school board employee or individual contracted by the School Board to provide school health services who administers naloxone or other opioid antagonist

used for overdose reversal in an emergency to an individual who is believed to be experiencing or about to experience a life-threatening opiate overdose shall not be liable for any civil damages for ordinary negligence in acts or omissions resulting from the rendering of such treatment.

Nonprescription Medications

Poquoson City Public Schools personnel may give non-prescription medication to students only with the written permission from the parent or guardian. Such permission shall include the name of the medication, the required dosage of the medication, and the time the medicine is to be given. Such medicine must be in the original container. In order for nonprescription medication to be given to a student for more than five (5) days, written permission from the child's physician shall be required.

Guidelines

The division superintendent shall develop guidelines for administration of medicines to students and for the secure storage of such medicines.

Student Possession and Self-Administration of Asthma Medications and Auto-Injectable Epinephrine

Poquoson City Public Schools students with a diagnosis of asthma or anaphylaxis, or both, may possess and self-administer inhaled asthma medication or auto-injectable epinephrine, or both, as the case may be, during the school day, at school-sponsored activities, or while on a school bus or other school property, consistent with the provisions of this policy and applicable law.

1. The student must provide to the relevant school clinic a completed Authorization and Permission for Administration of Medication form, signed by his parent, guardian or legal custodian. The student must also provide a written order from an appropriate health care provider as is further described in paragraph 2, below. The medication must be properly labeled by the pharmacy or physician. The nurse or clinic attendant may require the student to demonstrate his ability to safely and effectively self-administer the medication, consistent with the other provisions of this policy. To evaluate the efficacy of the medication, the elementary school students who self-administer asthma medications should report to the nurse or clinic attendant within a reasonable time after taking the medications. Secondary school students who need and self-administer the three doses of asthma medication per school day should report to the nurse or clinic attendant as soon as possible after administering the third dose for evaluation of respiratory status.
2. The student must provide a written order from his health care provider, medical specialist, licensed physician or a licensed nurse practitioner, which order must include: (i) the student's name; (ii) a statement that the student has a diagnosis of asthma or anaphylaxis, or both, and approval to self-administer inhaled asthma medications or auto-injectable epinephrine, or both, that have been prescribed or authorized for the student; (iii) the name and dosage of the medication, the frequency in which it is to be administered and certain circumstances which may warrant the use of inhaled asthma medications or auto-injectable epinephrine, or both, such as before exercising or engaging in physical activity, to prevent the onset of asthmatic symptoms or to alleviate asthmatic symptoms after the onset of an asthmatic episode; and (iv) an attestation that the student has demonstrated an ability to safely and effectively self-administer inhaled asthma medications or auto-injectable epinephrine, or both.
3. With cooperation from the student, his family and relevant school officials, the school nurse or clinician will develop an individualized health care plan for the student, which plan shall include emergency procedures for any life-threatening conditions. The student's parent, legal guardian, or custodian shall complete the Parental Permission for Medical Care form.

4. School officials, including the relevant nurse or clinician, will not impose any limitations or restrictions on or revoke permission for the student to possess or self-administer inhaled asthma medications, auto-injectable epinephrine, or both, without first consulting with the student's parent, legal guardian or custodian.
5. Self-administration of inhaled asthma medications, auto-injectable epinephrine, or both, by Poquoson City Public Schools students shall be consistent with the purposes of the Virginia School Health Guidelines and the Guidelines for Specialized Health Care Procedure Manuals, which are jointly issued by the Virginia Departments of Education and Health.
6. Disclosure or dissemination of information pertaining to the health condition of a student to School Board employees shall comply with the provisions of Virginia Code §§ 22.1-287 and 22.1-289, and the federal Family Education Rights and Privacy Act of 1974, as amended, 20 U.S.C. §1232(g).

Any school principal or other School Board employee who, in good faith, without compensation, and in the absence of gross negligence or willful misconduct, supervises the self-administration of inhaled asthma medications or auto-injectable epinephrine, or both, by a student pursuant to this Policy, shall not be held liable for any civil damages for acts or omissions resulting from such supervision. Further, no principal or School Board employee shall be liable for any civil damages for injuries or deaths resulting from the misuse of auto-injectable epinephrine. For the purposes of this policy, "employee" shall include any person employed by a local health department who is assigned to a public school pursuant to an agreement between the local health department and the School Board.

The permission granted a student with a diagnosis of asthma or anaphylaxis, or both, to possess and self-administer inhaled asthma medications or auto-injectable epinephrine, or both, shall be effective for 365 calendar days. Permission to possess and self-administer inhaled asthma medications or auto-injectable epinephrine shall be renewed annually.

Self-care of Students Diagnosed with Diabetes

Poquoson City Public Schools students with a diagnosis of diabetes may, with parental consent and the written approval of a prescriber, as defined in Virginia Code § 54.1-3401, (i) carry with them and use supplies, including a reasonable and appropriate short-term supply of carbohydrates, an insulin pump, and equipment for immediate treatment of high and low blood glucose levels, and (ii) self-check their own blood glucose levels on a school bus, on school property, and at a school-sponsored activity. A Poquoson City Public Schools employee who is a registered nurse, licensed practical nurse, or certified nurse aide and who has been trained in the administration of insulin and glucagon may assist a student who is diagnosed with diabetes and who carries an insulin pump with the insertion and reinsertion of the pump or any of its parts. Prescriber authorization and parental consent shall be obtained for any such employee to assist with the insertion or reinsertion of the pump or any of its parts. Nothing in this section shall require any employee to assist with the insertion or reinsertion of the pump or any of its parts.

Administration of Injected Medications for the Treatment of Adrenal Crisis

Pursuant to a written order or standing protocol issued by the prescriber within the course of his professional practice, such prescriber may authorize, with the consent of the parents as defined in Virginia Code § 22.1-1, an employee of the School Board, who is trained in the administration of injected medications for the treatment of adrenal crisis resulting from a condition causing adrenal insufficiency to administer such medication to a student diagnosed with a condition causing adrenal insufficiency when the student is believed to be experiencing or about to experience an adrenal crisis. Such authorization shall be effective only when a licensed nurse, nurse practitioner, physician, or physician assistant is not present to perform the administration of the medication.

Seizure Management and Action Plan; Training (delayed effective date July 1, 2022)

The parent or guardian of a student with a diagnosed seizure disorder may submit a seizure management and action plan developed by the student's treating physician for review by school division employees with whom the student has regular contact. The seizure management and action plan shall (i) identify the health care services the student may receive at school or while participating in a school activity, (ii) identify seizure-related medication prescribed to the student that must be administered in the event of a seizure, (iii) evaluate the student's ability to manage and understand his seizure disorder, and (iv) be signed by the student's parent or guardian, the student's treating physician, and the school nurse. Each such seizure management and action plan shall state that (a) such plan is separate from any individualized education program (IEP) or Section 504 Plan that is in place for the student and (b) nothing in such plan shall be construed to abrogate any provision of any IEP or Section 504 Plan that is in place for the student.

All school nurses must complete, on a biennial basis, a Board of Education-approved online course of instruction for school nurses regarding treating students with seizures and seizure disorders that includes information about seizure recognition and related first aid. Approved training programs shall be fully consistent with training programs and guidelines developed by the Epilepsy Foundation of America and any successor organization.

All School Board employees whose duties include regular contact with students must complete, on a biennial basis, a Board of Education-approved online course of instruction for school employees regarding treating students with seizures and seizure disorders that includes information about seizure recognition and related first aid. Approved training programs shall be fully consistent with training programs and guidelines developed by the Epilepsy Foundation of America and any successor organization.

Any School Board employee who, while on school property or at a school-sponsored event, renders care in accordance with a seizure management action plan pursuant to this policy, shall not be liable for any civil damages for ordinary negligence in acts or omissions resulting from the rendering of such treatment.

LEGAL REFERENCE: Code of Virginia, 1950, as amended, § 22.1-78, 22.1-274.2, 22.1-287, 22.1-289, 54.1-2957.02; Family Education Rights and Privacy Act of 1974, 20 U.S.C. § 1232(g).

Adopted: November 2002

Revised: July 2005, August 2012, August 2013, August 2014, August 2017, June 2020, August 2021

POLICY 7-5.6 PSYCHOLOGICAL EVALUATION AND SURVEYS OF STUDENTS

Generally

Psychiatric or psychological examination, testing or treatment, or survey, analysis or evaluation conducted as part of any program which is funded by the United States Department of Education or is otherwise subject to policies and regulations promulgated by any agency of the federal government shall be conducted in accordance with 20 U.S.C. § 1232h and the applicable federal regulations.

Any other human research involving students must be approved and conducted under the review of a human research committee established by the school division or the school conducting or authorizing the research. Such research will be conducted or authorized only after the student and the student's parents or legally authorized representative give their informed consent, as evidenced by a signed and witnessed informed consent form. The human research committee will submit to the Governor, the General Assembly, and the Superintendent of Public Instruction or his or her designee at least annually a report on the human research projects reviewed and approved by the committee. The report will state any significant deviations from the proposals as approved.

The human research committee will be composed of representatives of varied backgrounds to ensure the competent, complete, and professional review of human research activities. No member of the committee may be directly involved in the proposed human research or have administrative approval authority over the proposed human research except in connection with his or her responsibilities as a member of the committee. In deciding whether to approve proposed human research, the committee will consider the factors listed in Virginia Code § 32.1-162.19.

Research or student learning outcomes assessments conducted in educational settings involving regular or special education instructional strategies, the effectiveness of or the comparison among instructional techniques, curricula, or classroom management methods, or the use of educational tests, whether cognitive, diagnostic, aptitude, or achievement, if the data from such tests are recorded in a manner so that subjects cannot be identified, directly or indirectly, are exempt from the requirements of this Policy.

As used in this policy, "human research" means any systematic investigation, including research development, testing and evaluation, utilizing human subjects, that is designed to develop or contribute to generalized knowledge. "Human research" does not include research exempt from federal research regulation pursuant to 45 C.F.R. § 46.101(b).

Prohibition on Recommendations of Psychotropic Medications

Consistent with applicable law and Virginia Board of Education regulations and/or guidelines, school personnel are prohibited from recommending the use of psychotropic medications for any student. However, school health staff, classroom teachers and other school professionals are not prohibited from recommending that a student be evaluated by an appropriate medical practitioner, or from consulting with such practitioner, with the written consent of the student's parent. For the purposes of this policy, "psychotropic medications" means those medications the prescribed intention of which is to alter mental activity or state, including, but not limited to, antipsychotropic, antidepressant, and anxiolytic medication and behavior-altering medication.

LEGAL REFERENCE: Code of Virginia, 1950, as amended, §§ 22.1-16.1, 22.1-274.3, 32-162.16, et seq.; 20 U.S.C. Section 1232(h), 45 C.F.R. Part 46.

Adopted: November 2002

Revised: August 2006

POLICY 7-5.7 CHILD ABUSE AND NEGLECT REPORTING

Poquoson City Public Schools employees, in compliance with the Code of Virginia, Title 63.1, Chapter 12.1 Child Abuse and Neglect, shall report to the local department of social services, incidents of suspected child abuse and/or neglect. The Poquoson City School Board shall develop a written interagency agreement with the local department of social services as a protocol for investigating child abuse and neglect reports. The agreement shall be based on recommended procedures for conducting investigations developed by the Departments of Education and Social Services.

LEGAL REFERENCE: Code of Virginia, 1950, as amended, § 63.1-248.1 et seq.

Adopted: November 2002

Revised: July 2003, August 2014

POLICY 7-5.8 BUS AND SAFETY PATROLS

Bus Patrols

The Poquoson City Public Schools administration may organize school bus safety patrols to assist bus drivers in carrying out safe practices on and around school buses. The patrols shall have the responsibility for cooperating with the driver and principal in the interest of the safe operation of the buses.

Safety Patrols

The schools may organize safety patrols to assist students in the schools. Safety patrols may be asked to serve at designated locations. Members of school safety patrols shall receive adequate instruction in the appropriate duties and procedures and at all times shall be under the supervision of a competent adult who is a regular member of the school faculty.

LEGAL REFERENCE: Code of Virginia, 1950, as amended, § 22.1-78.

Adopted: November 2002

POLICY 7-5.9 SUICIDE PREVENTION

Generally

The Poquoson City School Board is committed to protecting its students from the risk of suicide. Any licensed instructional or administrative staff member who has reason to believe that a student is at imminent risk of suicide, based on a direct communication from that student occurring within the staff members' scope of employment, shall promptly report this matter to a qualified professional. The following licensed professionals are designated to assess suicide risks in students under this policy:

1. school counselor,
2. school nurse (RN or LPN),
3. school psychologist, and/or
4. the school social worker.

The student's parent/guardian will be notified as soon as practical, except as provided below. When making this contact, the staff member shall:

1. provide his name and position in the school;
2. tell the parent/guardian that in his professional judgment the student is at imminent risk of suicide;
3. assure the parent/guardian that the student is currently safe;
4. state the legal requirement for the call citing § 22.1-272.1 of the Code of Virginia;
5. ask the parent/guardian whether he or she is aware of the student's mental state;
6. ask the parent/guardian whether he or she wishes to obtain or has obtained mental counseling for the student;
7. provide names of community counseling resources if appropriate and offer to facilitate the referral; and
8. determine the parent's intent to seek appropriate services for the student.

If the qualified professional is unable to make contact with the parent/guardian by the end of the school day, then the professional shall seek treatment for a student without the parent's/guardian's authorization. If parental/guardian contact is made and, in the course of this contact, relevant issues of abuse or neglect are discovered (e.g., a parent acknowledges the child's suicidal intent but indicates no intent to act for the well-being of the child), the qualified professional shall report the abuse or neglect in accordance with policy 7-5.7. A student who is at imminent risk of suicide shall remain under qualified supervision until a parent/guardian or other authorized individual accepts responsibility for the student's safety. After a student has been identified or determined to be at imminent risk of suicide, the qualified professional shall make appropriate follow-up contact to ascertain the current status of the student and facilitate any in-school support that may be required. The qualified professional shall document the phone call to the parent/guardian by recording the:

1. time and date of the call;
2. parent/guardian response;
3. response plan agreed upon; and
4. anticipated follow-up.

If a student is determined to be at imminent risk of suicide and has indicated that the reason for this risk relates to parental abuse or neglect, the qualified professional shall not contact the parent/guardian. Instead, the qualified professional shall immediately report the alleged abuse in accordance with School Board Policy 7-5.7. The qualified professional needs to emphasize that immediate action is necessary to protect the student from harm.

Anti-Bullying or Suicide Prevention Materials

Prior to using any audio-visual materials that contain graphic sexual or violent content in any anti-bullying or suicide prevention program, the parent of the child participating in such a program shall be provided written notice of his right to review the material and his right to excuse his child from participating in the part of such program utilizing such materials.

LEGAL REFERENCE: Code of Virginia, 1950, as amended, §§ 22.1-207.2:1, 22.1-272.1, 63.1-248.3.

Adopted: November 2002

Revised: August 2019

POLICY 7-5.10 ANNUAL SCREENING FOR SCOLIOSIS

Within the time periods specified in regulations promulgated by the Virginia Board of Education, the Poquoson City School Board shall provide parent educational information or implement a program of regular screening for scoliosis for pupils in grades five (5) through ten (10), unless such students are pupils admitted for the first time to a public school who have been so tested as part of the comprehensive physical examination required by applicable Virginia law or the parents of such students have indicated their preference that their children not participate in such screening. The division superintendent or his/her designee is authorized to develop procedures for parents to indicate their preference.

LEGAL REFERENCE: Code of Virginia, 1950, as amended, § 22.1-273.1

Adopted: July 2003

POLICY 7-5.11 LOCAL SCHOOL WELLNESS POLICY

Poquoson City Public Schools is committed to the optimal development of every student. The Division believes that for students to have the opportunity to achieve personal, academic, developmental and social success, we need to create positive, safe and health-promoting learning environments at every level, in every setting, throughout the school year.

The School Board will ensure the following:

- Students in the Division have access to healthy foods throughout the school day – both through reimbursable school meals and other foods available throughout the school campus– in accordance with Federal and state nutrition standards;
- Students receive quality nutrition education that helps them develop lifelong healthy eating behaviors;
- Students have opportunities to be physically active before, during and after school;
- Schools engage in nutrition and physical activity promotion and other activities that promote student wellness;
- School staff are encouraged and supported to practice healthy nutrition and physical activity behaviors in and out of school;
- The community is engaged in supporting the work of the Division in creating continuity between school and other settings for students and staff to practice lifelong healthy habits; and
- The Division establishes and maintains an infrastructure for management, oversight, implementation, communication about and monitoring of the policy and its established goals and objectives.
- Superintendent’s Regulation related to student wellness (7-5.11)

This policy applies to all students, staff and schools in the Division.

Under the Healthy, Hunger-Free Kids Act of 2010 and pursuant to the Final Rule the wellness policy will, at a minimum, include the following:

Requirements

- Specific goals for nutrition promotion and education, physical activity, and other school-based activities to promote wellness. Superintendent’s Regulation related to fundraising (2-5.4)
- Standards and nutrition guidelines for all foods and beverages (F&B) sold to students consistent with:
 - School meal nutrition standards
 - Smart Snacks in School nutrition standards
- Standards for F&B provided, but not sold, to students during the school day (e.g. classroom parties, incentive foods and food brought by parents).
- Guidelines for F&B marketing that allow marketing and advertising of only those foods and beverages that meet the Smart Snacks in school nutritional standards.
- Wellness Leadership will consist of officials that have the authority and responsibility to ensure each school is in compliance
- Broad participation to include general public parents, students, school food authority, physical education, school health professionals, school administrators and others.
- Triennial Assessment will be performed by Poquoson City Public Schools. The Wellness Policy will be reviewed and/or updated triennially based on Triennial Assessment conclusions.
- Public updates on an annual basis.

LEGAL REFERENCE: National School Lunch Program 42 U.S.C. Sec. 1751 et seq., School Breakfast Program 42 U.S.C. Sec. 1773, Child Nutrition and WIC Reauthorization Act of 2004, Healthy, Hunger-Free Kids Act of 2010 P. L. 222-296, National Food Service Programs, Title, 7, Code of Federal Regulations 7 CFR Part 210, Part 220 ;.

Adopted: June 2006

Revised: November 2017, February 2022

POLICY 7-5.12 INFORMATION REGARDING EATING DISORDERS

The Poquoson City School Board shall annually provide parent educational information regarding eating disorders for pupils in grades five through 12. Such information shall be consistent with guidelines set forth by the Department of Education.

The School Board shall also annually provide to parents of pupils in grades kindergarten through 12 educational information regarding the health dangers of tobacco and nicotine vapor products. Such information shall be consistent with guidelines set forth by the Department of Education.

LEGAL REFERENCE: Code of Virginia, 1950, as amended, § 22.1-273.2 and 22.1-273.3

Adopted: August 2013, June 2020

POLICY 7-5.13 STUDENT LACTATION SUPPORT

Each school building shall have a private, non-restroom location, shielded from public view, available for a student to take reasonable breaks during the school day to express breast milk to feed her child until such child reaches the age of one.

LEGAL REFERENCE: Code of Virginia, 1950, as amended, § 22.1-79.5.

Adopted: August 2014

POLICY 7-5.14 STUDENT MENSTRUAL SUPPLIES

The Poquoson City School Board shall make menstrual supplies available, at all times and at no cost to students, in such accessible locations as it deems appropriate in each elementary school in the school division. The School Board shall make menstrual supplies available, at all times and at no cost to students, in the bathrooms of each middle school and high school in the school division.

As used in this policy, "menstrual supplies" means tampons or pads for use in connection with the menstrual cycle.

LEGAL REFERENCE: Code of Virginia, 1950, as amended, § 22.1-6.1.

Adopted: June 2020

POLICY 7-5.15 TOPICAL SUNSCREEN

Any public elementary or secondary school student may possess and use unscented topical sunscreen in its original packaging on a school bus, on school property, or at a school-sponsored event without a note or a prescription from a licensed health care professional if the topical sunscreen is approved by the U.S. Food and Drug Administration for nonprescription use for the purpose of limiting damage to skin caused by exposure to ultraviolet light.

LEGAL REFERENCE: Code of Virginia, 1950, as amended, § 22.1-274.5.

Adopted: June 2020