

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 shall 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.

A health certificate is required within 30 calendar days for all students entering the school district for the first time, and upon entering pre-kindergarten kindergarten, first, third, fifth, seventh, ninth, and eleventh grades. The examinations, 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 for a health examination, health history, examination for health appraisal, screening examination for sickle cell anemia and/or other health screenings is a claim that such examination is in conflict with a parent or guardian's genuine and sincere religious belief. Health examinations shall also be provided prior to student participation in strenuous physical activity and periodically throughout the season as necessary and for all students who need work permits.

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 related to student privacy.

In addition, students will be asked to provide a dental health certificate within 30 days after a student's entrance into the school and after entering first, third, fifth, seventh, and ninth grades. An examination and dental health history of any student may be requested by school authorities at any time in their discretion to promote the educational interests of the child.

Student Health Services (Continued)

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).

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

Schools shall also provide emergency care for students in accidental or unexpected medical situations. Each school in the district will include in its emergency plan a protocol for responding to health care emergencies, including anaphylaxis, and head injury. The district will stock epinephrine auto-injectors for non-patient specific use. 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 to prevent opioid overdose. Parents/guardians will be notified of any emergency medical situation as soon as is practicable. Parents/guardians will receive notification of non-emergency medical situations that have been reported to the nurse in a timely manner.

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 school nurse.

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.

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.,

Student Health Services (Continued)
Administering Medication to Students (Continued)

Section 504 of the Rehabilitation Act of 1973). "Medication" will include all medicines prescribed by a physician.

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 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 by both 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 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.

In addition, in accordance with Education Law 919, the district shall make a nebulizer available on-site in school buildings, where nursing services are provided. Student with a patient-specific order, who require inhaled medications, shall have access to the nebulizer. The district will ensure that it is maintained in working order.

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

Student Health Services (Continued)
Life Threatening Allergies and Anaphylaxis Management (Continued)

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 emergency action plan. The plan will be maintained by the school nurse. The plan will guide prevention and response. If the student is eligible for accommodations based on the IDEA, Section 504 or the Americans with Disabilities Act, the appropriate procedures will be followed regarding identification, evaluation and implementation of accommodations.

Confidentiality

All student records pertaining to health maintained by the school district shall be kept confidential in accordance with the Family Educational Rights and Privacy Act (FERPA) and any other applicable Federal and State Laws.

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 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.

Policy Adopted:

September 20, 1976

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June 24, 2024

STUDENT HEALTH SERVICES REGULATION

This regulation provides specific details about major areas of the district's student health services, such as immunization, medications, medical exams, medical care, emergency records, and return to school after injury/illness. For purposes of this regulation, the McKinney-Vento liaison will assist homeless students covered by that law in accessing school health services.

Immunization

Under state Public Health Law 2164, in order to be enrolled in or attend district schools, children must be fully immunized against certain communicable diseases. Those diseases are: poliomyelitis, mumps, measles, diphtheria, rubella, varicella (chicken pox), hepatitis B, pertussis, tetanus, and, where applicable, *Haemophilus influenzae* type b (Hib), pneumococcal disease, and meningococcal disease.

“Fully immunized” means that the child has either (1) received the required vaccinations for these diseases as set forth in state regulations; or (2) demonstrated having immunity:

- a. for measles, mumps, and rubella – by showing a positive blood test for the disease antibodies;
- b. for varicella – by showing (1) a positive blood test for the disease antibodies, (2) laboratory confirmation of the disease, or (3) verification by a doctor, nurse practitioner, or physician's assistant that the student had the disease;
- c. for hepatitis B – by showing a positive blood test for the disease antibodies; and
- d. for poliomyelitis – by showing a positive blood test for the disease antibodies for all three types (limited to tests performed prior to 9/1/19).

Children who are not fully immunized may only be admitted to school if parents/guardians submit documentation that they (1) are in the process of receiving immunization or obtaining blood tests (as described in state regulations 10 NYCRR Subpart 66-1); or (2) have been granted a medical exemption.

Medical exemptions may be issued if immunization is detrimental to a child's health. Medical exemptions must be on the medical exemption form approved by the New York State Department of Health or the New York City Department of Health, signed by a physician licensed to practice medicine in New York State indicating the specific immunization, the medical contraindication, and the length of time the exemption is for. Medical exemptions must be reissued annually to remain valid. The Building Principal may require supporting documents for medical exemptions.

All students must present appropriate documentation of their immunization status, as set forth in the Regulations of the Commissioner of Health 10 NYCRR Subpart 66-1. Homeless students will be admitted to school even if they do not have the required 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.

Student Health Services Regulation (Continued)

The Building Principal may permit students without adequate documentation to attend school up to 14 calendar days while the parent/guardian furnishes the necessary documents. This time period may be extended to 30 days for students transferring from another state or country, as long as they show a good faith effort to obtain the necessary documentation.

District schools may access the New York State Immunization Information System (NYSIIS) or the New York City Citywide Immunization Registry (CIR) to verify the immunization history of students entering or registered in that school.

When a child is excluded from school for immunization reasons, the Building Principal must notify the parent/guardian of their responsibility to have the child immunized, and the public resources available for doing so. The Principal must also notify the local health authority of the child's name and address and the immunization(s) the child lacks, and cooperate with that authority to provide a time and place for the required immunization(s) to be administered.

The District will maintain a list of all students who have been exempted from immunization for medical reasons, or who are in the process of receiving immunization, and will exclude such students from school when so ordered by the Commissioner of Health, in the event of an outbreak in school of the vaccine-preventable diseases listed in Public Health Law 2164 and the first paragraph of this section.

When a student transfers out of the district, the parent/guardian will be provided with an immunization transfer record showing the student's current immunization status which will be signed by the school nursing personnel or the school physician. A transcript or photocopy of the immunization portion of the cumulative health record will be provided to the new educational institution upon request. The District will provide an annual summary of compliance with immunization requirements to the Commissioner of Health.

Administering Medication to Students in School

The administration of prescribed medication to a student during school hours is permitted only when the medication is necessary to allow the student to attend school or failure to administer the medication would seriously affect the student's health.

Student Health Services Regulation (Continued)

Parent(s) or guardian(s) must present the following:

1. A written order from a NYS licensed health care provider (e.g. physician, nurse practitioner or physician assistant) containing the following information:
 - a. the student's name and date of birth
 - b. name of the medication
 - c. dosage and route of administration
 - d. frequency and time of administration
 - e. for PRN (as necessary) medication, conditions under which such medication should be administered.
 - f. date written
 - g. prescriber's name, title, and signature
 - h. prescriber's phone number and address
2. A written note from the parent(s) or guardian(s) giving appropriate licensed school personnel permission to administer the medication to their child during school or for trained unlicensed personnel to assist their child in taking their own medication.

Students Who May Carry and Use Certain Medications

Students are permitted to self-administer medication under certain circumstances in accordance with state law and regulation. A student is authorized to carry and use the following medications: rescue inhaler, epinephrine auto-injector, insulin, glucagon (and associated diabetes testing supplies), if the following conditions are met:

1. An authorized medical provider must provide written permission that includes an attestation that the student's diagnosis requires the medication; the student has demonstrated that they can self-administer the prescribed medication effectively; the name of the medication, the dose, the times when it is to be taken, the circumstances which may warrant use and the length of time during which the student may use it.
2. Written parental permission.

If a student is authorized to carry and use medication as described above, the parent/guardian is permitted to give extra medication and supplies that the district will maintain in accordance with the written directions submitted by the authorized medical provider. Such extra medication and supplies will be readily accessible to the student.

All documents pertaining to student medication will be kept on file in the nurse's office.

The school nurse shall develop procedures for the administration of medication, which require that:

1. all medications will be administered by a licensed person unless the child is a "supervised student" (able to self-administer with assistance and supervision) or an "independent student" (able to self-administer and self-carry);

Student Health Services Regulation (Continued)

2. medications, other than as noted above, shall be securely stored in the office and kept in their original labeled container, which specifies the type of medication, the amount to be given and the times of administration;
3. the school nurse shall maintain a record of the name of the student to whom medication may be administered, the prescribing physician, the dosage and timing of medication, and a notation of each instance of administration; and
4. all medications shall be brought to school by the parent(s) or guardian(s) and shall be picked up by the parent(s) or guardian(s) at the end of the school year or the end of the period of medication, whichever is earlier. If not picked up within five days of the period of medication, the medication shall be discarded.

An adult must bring the medication to school in the original container. The administering staff member should clearly label the medication with the time to be given and dosage.

Sunscreen. Students are permitted to carry and apply sunscreen without a medical provider's order under the following conditions:

1. the sunscreen is used to avoid overexposure to the sun and not for medical treatment of an injury or illness, if sunscreen is required to treat a medical condition, the procedures for administering medication (above) apply;
2. the sunscreen is FDA approved for over the counter use;
3. the student's parents or guardians provide written permission annually for the student to carry and use the sunscreen.

The school nurse will keep written permission for students on file and develop procedures pertaining to this policy.

Student Health Services Regulation (Continued)

Administering medication on field trips and at after-school activities. Taking medication on field trips and at after-school activities is permitted if a student is “an independent student” described above in administering their own medication. On field trips or at other after-school activities, teachers or other school staff may carry the medication (if the student does not need it on hand for rapid administration) so that the independent student can take it at the proper time. If a student is a “supervised student” described above, unlicensed school personnel who have been trained by a licensed school health professional may assist the student in taking medication. The student’s parent/guardian, if attending the trip, may also perform these activities, but may not be required to do so.

If a student is “nurse dependent” (i.e., requires a licensed health professional to administer their medication), then the student must have their medication administered by a licensed health professional, or the district may:

- permit the parent or guardian to attend the activity and administer the medication.
- permit the parent to personally request another adult friend or family member who is not employed by the school to voluntarily administer the medication on the field trip or activity and inform the school district in writing of such request.
- allow the student’s health care provider to be consulted and, if he/she permits, order the medication time to be adjusted or the dose eliminated.

If no other alternative can be found, a school nurse or licensed person must administer the medication, or the trip will be cancelled or rescheduled.

Administering epi-pen in emergency situations. The administration of epinephrine by epi-pen has become an accepted and extremely beneficial practice in protecting individuals subject to serious allergic reactions (e.g., individual has an anaphylactic reaction to a wasp sting or the ingestion of peanut butter).

Pursuant to Commissioner’s regulations, registered professional nurses may carry and administer agents used in non-patient specific emergency treatment of anaphylaxis.

In addition, pursuant to SED guidelines, school nurses may provide training to unlicensed school staff in administering epi-pens, epinephrine auto-injectors and glucagon prescribed by a licensed prescriber, to a child who has been diagnosed with the associated disease in accordance with the process described in this policy and regulation.

Student Medical Exams

In accordance with Section 903 of the state Education Law and section 136.3 of the Regulations of the Commissioner of Education, each student shall have a physical exam given by the school doctor or family physician (including a physician, physician assistant, or nurse practitioner) upon initial entrance to school and at grades pre- kindergarten or kindergarten, one, three, five, seven, nine, and eleven. Findings are to be kept on record at the school on forms that can be obtained from the school nurse. In addition, the

Student Health Services Regulation (Continued)

addition, the school will request a dental health certificate according to the same schedule.

A student may be excluded from the medical examination requirements because the child's parent/guardian holds a genuine and sincere religious belief which is contrary to medical examinations. The request for exemption must be in writing to the principal or his/her designee.

In the event that a student's medical history reveals that they have a known life-threatening allergy, the school nurse, in conjunction with the family, student, child's teacher, and other appropriate staff, will develop and implement a prevention and response plan.

The District will work with students in the self-management of their life-threatening allergy, or other chronic health conditions, by:

1. Adequately training staff involved in the care of the child.
2. Assuring the availability of the necessary equipment and/or medications.
3. Providing appropriately licensed and trained persons on school premises, as required by law.
4. Providing ongoing staff and student education.

Illness in School

If a student becomes ill in school:

1. The nurse will determine if the student should receive further medical attention, remain in the dispensary or return to class.
2. The nurse will call the parent, guardian or designated emergency contact if he/she feels the student should go home. In general, a parent or guardian will pick up the student from school.
3. The nurse will contact the Building Principal if he/she feels the child should be transported by bus to the home.
4. If there is to be a change in bus routing in order to carry the student to his/her home, that decision will be made by the administrator and the transportation supervisor.
5. If the route is to be changed, the transportation supervisor shall inform the bus driver.
6. If no parent, guardian or substitute parent picks up the student at school, or if no parent/guardian or designated emergency contact will be home, the student will remain in the nurse's office until such time as a parent, guardian or designated emergency contact becomes available to assume responsibility for the child.

Student Health Services Regulation (Continued)

7. While in the nurse's office, to the extent possible, students showing symptoms of communicable diseases will be kept separate from students with non-transmissible illness or injuries, and the district will take measures necessary to minimize disease transmission (e.g., physical barriers, face coverings, heightened hygiene procedures).
8. The nurse will maintain appropriate records of all student visits.

The health office is responsible for obtaining and maintaining records in order to provide appropriate follow up in the event of a student injury, whether the injury occurs in school, on school grounds, on a school-sponsored trip or at an athletic event.

Staff members are asked to report all student injuries to the health office as soon as practical after the staff member becomes aware of the injury.

The district permits the administration of opioid antagonists, such as naloxone, to prevent opioid overdose, pursuant to policy 8121.1, Opioid Overdose Prevention. District staff must follow all regulations regarding the storage, accessibility, administration, recordkeeping, and reporting of naloxone use.

Student Return to School after Illness/Injury

In general, students should be symptom-free before returning to school and resuming normal activities. In the case of communicable diseases, students must no longer be contagious. In some instances, students may be asked to provide a note from their licensed health care provider or meet specific indicators before they return to school or participate in the full range of school activities. The final decision to permit participation rests with the school physician. The Superintendent, in consultation with public health authorities, the school physician, nurse and other appropriate staff, will develop protocols to address a student's return to activities when there has been a serious illness or injury.

Medical Emergency Record

All students shall have on file a medical emergency record which shall state the name and telephone numbers of the following:

1. the student's parent(s) or guardian(s) at home and work;
2. the student's next of kin;
3. a neighbor;
4. the family physician;
5. preferred hospital;
6. any allergies or serious health conditions.

Student Health Services Regulation (Continued)

Students diagnosed with diabetes will have a written diabetes management plan maintained as part of the student's cumulative health record. The management plan will be developed in accordance with state regulation and district procedures. Students diagnosed with asthma or other respiratory disease requiring a rescue inhaler, students diagnosed with life-threatening allergy or diabetes may have an emergency action plan maintained as part of the student's cumulative medical record. The emergency action plan will be developed in accordance with state regulation and district procedures.

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