

**HEALTH SERVICES AND COMMUNICABLE DISEASES**

**Health Services:** District nurses or other designated personnel shall perform all first aid and emergency care in accordance with applicable laws and regulations. First aid may also be administered by any principal, administrator, secretary, counselor, and other qualified personnel as designated. In the event of a serious injury to or illness of a student, school personnel shall contact emergency services (911) if deemed appropriate. School personnel shall also attempt to notify the student’s family or guardian as soon as possible. However, the determination to contact emergency services and to have a student treated by emergency services or transported by emergency services, shall be within the discretion of school personnel unless the student’s parent/guardian is present at school. District is not responsible for any transportation and/or medical costs associated with emergency care.

**Communicable Diseases:** Any employee or student with knowledge of a suspected or confirmed case of a communicable or contagious disease is responsible for reporting this information to the appropriate personnel. Exclusions from school may be required when it is deemed necessary to promote the safety and well-being of all students and employees. Decisions about how best to provide educational services to those students excluded from school because of a communicable or contagious disease shall be made by the Administration. The Administration may consult with and seek the advice of available District and/or county health officials.

In dealing with communicable or contagious diseases, District believes that:

1. Public education should be made available in the least restrictive environment that is appropriate to the individual needs of the student.
2. Public education should be provided in a safe and orderly environment.
3. Each student and employee should be treated with dignity and has a right to confidentiality.
4. Students or employees infected with HIV (the AIDS virus) or other communicable or contagious diseases will not be subjected to illegal discrimination but will be dealt with in a manner consistent with District’s legal obligations to the infected student or employee as well as its obligation to all other students and employees of District.

Communicable or contagious diseases shall be evaluated on an individual basis considering whether the condition is life threatening, the degree of communicability, and whether the disease has been or should be confirmed with laboratory documentation.

All information concerning any medical information of any student or employee is strictly confidential. No board member or employee of District may negligently, knowingly or intentionally disclose or fail to protect medical or epidemiological information except as required by law. Any District official, officer or employee who discloses such information, except as required by law, will be subject to discipline as well criminal and civil sanctions under law.

- A. Placement of Students: In determining the placement of a student with a communicable or contagious disease, a multi-disciplinary team may be convened as provided by law. If a student is to be excluded from school because of a communicable or contagious disease, the student shall be placed on the home bound program until the student is able to return to school. Readmittance to school may require a statement by a physician or other health professional stating that the student is no longer a direct

threat to the health or safety of students and employees. Any records regarding a student’s communicable or contagious disease shall be maintained separately from the student’s cumulative record, and information regarding the student’s communicable or contagious disease shall only be provided to those school employees or agents who have a need to know.

- B. Placement of Employees: No employee may be dismissed or have his or her contract not renewed merely as a result of having a communicable or contagious disease except as allowed by law. District personnel who are required to be absent from their work due to a communicable or contagious disease shall be subject to the District’s applicable sick leave policy and/or, if applicable, the Family Medical Leave Act. Readmittance to work may require a statement by a physician or other health professional stating that the employee is no longer a direct threat to the health and/or safety of students and employees. No entry regarding a communicable or contagious disease shall be made in the employee’s personnel file but may be maintained in a separate file.

**Bloodborne Pathogens:** Body fluids of any person may contain infectious or contagious bacteria or viruses which may be spread from one person to another by accidental or careless handling of body fluids during sanitation work, custodial work, or the administration of emergency first aid. In accordance with the Bloodborne Pathogens Act, the Board shall promote an environment within which all employees and students are protected from contagion.

The Superintendent shall establish regulations which shall include a control plan, vaccination procedures, the handling and disposal of body fluids, and exposure follow-up procedures in order to comply with the Bloodborne Pathogens Act. District shall provide appropriate instruction in the handling of body fluids through in-service presentations or other means. The Superintendent shall also direct the identification of employees who may, as a result of their job duties, be in contact with blood or other potentially infectious materials. Any employees so identified shall be offered Hepatitis B vaccinations at District’s expense. District shall also make personal protective equipment available to employees for use in handling and disposing of body fluids.

**Head Lice:** According to Oklahoma State Law (70 O.S. 1981, Section 1210. 194A). “Any school child afflicted with a contagious disease or head lice may be prohibited from attending a public, private, or parochial school until such time as he/she is free from the contagious disease or head lice.” Head lice is not a serious communicable disease; however, it has serious educational, social and economic effects on the student and family. Head lice is not an indicator of poor hygiene or housekeeping and has no respect for age, race, sex or socio-economic class.

**Bed Bugs:** If a suspected bed bug is found on a student the parent will be notified to pick up the child.

**Administering Medication:** Medication may be administered to students as prescribed by law. For purposes of this policy, medication or medicine includes prescription medication as well as over-the-counter medicines. Students may not retain possession of or self-administer any medication unless written permission is granted by District upon written request of the parent.

A student who has a legitimate health need for a medicine shall deliver the medicine to the principal or the principal's designee in its original container with the written authorization of the student's parent or guardian for administration of the medicine. The parent's authorization must identify the student, the medicine, and include or refer to the label for instructions on administration of the medicine. The medicine will be administered to the student according to the directions for use on the label for over-the-counter medications or the physician's prescription. Forms for parental authorization of administration of medicines are available in the office of the principal.

Epinephrine Injectors and Albuterol Inhalers: A school nurse or school employee who has been trained by a health care professional or in correlation with the State Department of Health's Diabetes Management Annual School Training Program may administer, with parent or guardian permission, but without a health care provider order, an Epinephrine injection to a student whom the school nurse or trained school employee in good faith believes is having an anaphylactic reaction. A waiver of liability executed by the parent or guardian shall be on file with the District prior to the administration of an Epinephrine injection pursuant to applicable law. District will designate the employee responsible for obtaining the Epinephrine injectors at each school site.

A school nurse or school employee trained by a health care professional may administer an inhaler to a student whom the school nurse or trained school employee in good faith believes is having respiratory distress. District will designate the employee responsible for obtaining the inhalers and spacers or holding chambers at each school site. District will notify the parent if there is no improvement in concurrence with the orders that have been provided. District and its employees and agents shall incur no liability as a result of injury arising pursuant to the discharge or nondischarge of the powers listed in this subsection.

In the event that a student is believed to be having an anaphylactic reaction or respiratory distress or has had epinephrine administered, a school employee shall contact 911 and the student's parents/guardians as soon as possible.

"Respiratory Distress" – the perceived or actual presence or coughing, wheezing or shortness of breath.

"Inhaler" – a device that delivers a bronchodilator to alleviate symptoms of respiratory distress that is manufactured in the form of a metered-dose inhaler or dry-powder inhaler and that may include a spacer or holding chamber that attaches to the inhaler to improve the delivery of the bronchodilator.

The school shall keep a record of the students to whom medicine is administered, the date of administration, the person who administered the medicine, and the name or type of medicine administered. The records shall remain confidential and shall not be divulged except as required by law.

The school will return unused prescription or over-the-counter medication to the parent or guardian only on or before the last day of school or the medication will be disposed of in accordance with applicable law and/or regulations. Medication will not be sent home with students.

Diabetes and Administration of Glucagon: A diabetes medical management plan ("Plan") will be developed for any student with diabetes who will seek care for diabetes while at school or involved in a school activity. The plan

will be developed by the student’s personal health care team, consisting of the principal or designee, the school nurse, if applicable, the parent or legal guardian of the student and where practical, the student’s treating physician. The Plan shall indicate whether the parent or legal guardian has provided written consent for the student to receive diabetes care as provided for by law, including but not limited to the administration of glucagon to a student experiencing a hypoglycemic emergency.

With written consent from the parent or guardian of a student with continuous glucose monitoring with electronic access to glucose numbers, a school nurse, diabetes care assistant, or employee trained by a health care professional may download the necessary electronic applications or software to a district-provided electronic device. If a district-provided device is unavailable, the applications or software may be downloaded to the school nurse, diabetes care assistant, or trained employee’s personal electronic device.

Emergency Opioid Antagonist: Any nurse or licensed practitioner as provided for by law, or other person designated by the administration to administer an emergency opioid antagonist in the event of a suspected overdose is authorized, regardless of the existence of a prescription or standing order, to administer an emergency opioid antagonist to a student or other individual who is exhibiting signs of an opioid overdose.

The administration will authorize one or more employees to receive training, as provided for by law, in recognizing the signs of an opioid overdose, instruction in basic resuscitation techniques, instruction on proper administration of an emergency opioid antagonist and the importance of calling 911 for assistance. In the event that a person who has been designated and trained to administer an emergency opioid antagonist is unavailable, the administration may authorize any person, regardless of the existence of a prescription or standing order, to administer an emergency opioid antagonist to a student or other individual showing signs of an overdose. Any person administering an emergency opioid antagonist under the provisions of this section shall be covered under the Good Samaritan Act and shall be immune from civil liability.

For purposes of this policy, an “emergency opioid antagonist” is a drug, including but not limited to naloxone, that is approved by the United States Food and Drug Administration (“FDA”) for treatment of an opioid overdose and that blocks the effects of opioids.

**Self-administration of Certain Medication:** Pursuant to Oklahoma law, students may be allowed to carry and self-administer prescribed inhaled asthma medications, prescribed anaphylaxis medication, and replacement pancreatic enzymes for treatment of cystic fibrosis according to the provisions of this policy. District shall not incur any liability as a result of any injury arising from the self-administration of asthma medication, anaphylaxis medication, or replacement pancreatic enzyme medication by a student. If the requirements of this policy are fulfilled, a student diagnosed with asthma, anaphylaxis, or cystic fibrosis may possess and use his or her labeled asthma, anaphylaxis, or replacement pancreatic enzyme medication at all times.

The student’s parent or guardian shall:

1. Provide the school with a written statement on the form prescribed by the Board authorizing the self-administration of inhaled asthma, anaphylaxis, or replacement pancreatic enzyme medication. Such

written statement shall acknowledge that District shall not incur any liability as a result of any injury arising from the self-administration of asthma, anaphylaxis, or replacement pancreatic enzyme medication by a student.

2. Provide the school with a written statement from the student's treating physician containing the following information:
  - a. That the student has asthma, anaphylaxis, or cystic fibrosis;
  - b. That the student is capable of and has been instructed in the proper method of self-administration of the student's asthma, anaphylaxis, or replacement pancreatic enzyme medication;
  - c. The name and purpose of the asthma, anaphylaxis, or replacement pancreatic enzyme medication;
  - d. The prescribed dosage; and
  - e. The time or times at which and special circumstances, if any, under which the asthma, anaphylaxis, or pancreatic enzyme medication is to be administered.
3. Provide the school with an emergency supply of the student's asthma, anaphylaxis, or replacement pancreatic enzyme medication(s) to be administered pursuant to Oklahoma law by school nurse or other authorized personnel.
4. Provide asthma, anaphylaxis, or replacement pancreatic enzyme medication to be carried by the student which is appropriately labeled, with a prescription label reflecting the following:
  - a. Student's name;
  - b. Prescription number;
  - c. Asthma, anaphylaxis, or replacement pancreatic enzyme medication name and dosage;
  - d. Method of administration and dosage;
  - e. Date of prescription and refill;
  - f. Licensed prescriber's name;
  - g. Pharmacy name, address and telephone number; and
  - h. Name of pharmacist.

The authorization for self-administration of asthma, anaphylaxis, and replacement pancreatic enzyme medications from the parent or guardian and from the physician shall be kept on file in the office at the school site where the student is enrolled. The authorization for self-administration of asthma, anaphylaxis, and replacement pancreatic enzyme medication shall be effective only for the school year in which the authorization is submitted by the student's parent or guardian. The parent or guardian shall be responsible for renewing an authorization for each subsequent school year.

For purposes of this policy, "asthma medication" and "anaphylaxis medication" shall mean a metered dose inhaler or a dry powder inhaler to alleviate asthmatic symptoms, prescribed by a physician and having an individual label, or an anaphylaxis medication used to treat anaphylaxis, including but not limited to Epinephrine injectors, prescribed by a physician and having an individual label. "Replacement pancreatic enzyme medication" shall mean medication prescribed by a physician and having an individual label. "Self-administration" shall mean a student's use of asthma, anaphylaxis or replacement pancreatic enzyme medication pursuant to a prescription or written direction from a physician.

**Seizure-Safe Schools Act:** This Act shall apply to schools that have a student enrolled who has a seizure disorder and has a seizure rescue medication or other medication prescribed to treat seizure disorder symptoms approved by the United States Food and Drug Administration (“FDA”) and any successor agency prescribed by the student’s health care provider.

Beginning January 1, 2022 and subject to all corresponding laws and regulations, District shall have at least one employee at each school site who has met the training requirements necessary to:

1. Administer or assist with the self-administration of a seizure rescue medication or medication prescribed to treat seizure disorder symptoms as approved by the FDA and any successor agency; and
2. Recognize the signs and symptoms of seizures and the appropriate steps to be taken to respond to these symptoms.

Before a seizure rescue medication can be administered to a student to treat seizure disorder symptoms, the student’s parent or legal guardian shall:

1. Provide the school with written authorization to administer the medication at school;
2. Provide a written statement from the student’s health care provider that contains the following information:
  - a. The student’s name,
  - b. The name and purpose of the medication,
  - c. The prescribed dosage,
  - d. The route of administration,
  - e. The frequency that the medication must be administered, and
  - f. The circumstances under which the medication may be administered;
3. Provide the prescribed medication to the school in its unopened, sealed package with the label affixed by the dispensing pharmacy intact; and
4. Collaborate with school personnel to create a seizure action plan.

The written authorization, written statement, and seizure action plan will be stored in the office of the school nurse or school administrator and will be distributed to any school personnel or volunteers responsible for supervision or care of the student. The written authorization for administration of seizure rescue medication shall only be effective for the school year in which it is granted and must be renewed each subsequent school year. School employees will not be subject to disciplinary proceedings or liability resulting from any action taken in compliance with the Seizure-Safe Schools Act, as provided for by law.

**Sunscreen:** Pursuant to the written authorization of a student’s parent or guardian, a school nurse, or in the absence of such nurse, an administrator or designated school employee, may assist a student in applying sunscreen, a compound topically applied to prevent a sunburn. In addition, District shall permit students to possess and self-apply sunscreen that is regulated by the FDA without the written authorization of a parent, legal guardian or physician.