Students 5141(a)

### **Student Health Services**

# **School District Medical Advisor**

The North Canaan Board of Education shall appoint a school district medical advisor and appropriate medical support service personnel including nurses.

The school district medical advisor, in cooperation with the Board and the board of health/health department for the school district, shall:

- 1. Assist in the planning and administration of each school's health program,
- 2. Advise on the provision of school health services,
- 3. Provide consultation on the school health environment, and
- 4. Perform any other duties as agreed between the advisor and the appointing board of education.

The School Medical Advisor works in collaboration with the school nurse to ensure that school health efforts shall be directed toward detection and prevention of health problems and to emergency treatment, including the following student health services:

- 1. Appraising the health status of student and school personnel;
- 2. Counseling students, parents, and others concerning the findings of health examination;
- 3. Encouraging treatment of health concerns;
- 4. Helping prevent and control disease;
- 5. Maintaining school health records.

# **Health Records**

There shall be a health record for each student enrolled in the school district which will be maintained in the school nurse's room. For the purposes of confidentiality, records will be treated in the same manner as the student's cumulative academic record.

Student health records are covered by the Family Educational Rights and Privacy Act (FERPA) and are exempt from the Health Insurance Portability Act (HIPAA) privacy rule. However, it is recognized that obtaining medical information from health care providers will require schools to have proper authorization and to inform parents that such information once released by health care providers is no longer protected under HIPAA but is covered under FERPA.

# **Regular Health Assessments**

Physical exams are required upon entry as a new student. Physical Exams must be within the previous 12 months and conducted by a US licensed health care provider (MD, DO, APRN, PA).

Current students: All pre-school, kindergarten, 6th grade and 9th grade students are required to provide a physical examination completed within the previous 12 months with an immunization update.

Grade 7-12 Athletes: An annual physical exam is required for high school athletes participating in interscholastic sports.

Health assessments may be conducted by any of the following professionals:

- 1. A licensed medical physician (MD, DO)
- 2. A licensed advanced practice registered nurse (APRN)
- 3. A licensed physician's assistant (PA)

Such health assessment shall include:

- 1. Physical examination which shall include hematocrit or hemoglobin tests, height, weight, and blood pressure, and a chronic disease assessment in accordance with the requirements indicated on the State of CT Department of Education Health Assessment Record.
- 2. Updating of immunizations required under C.G.S. 10-204a as periodically amended;
- 3. Vision, hearing, postural, and gross dental screenings;

A child will not be allowed to begin or continue in district schools unless health assessments are performed as required. Students transferring into the district must provide documentation of the required health assessment and a complete immunization record including the required Connecticut vaccinations-at enrollment and prior to school attendance.

Every year, the school nurse shall receive reports of health assessments and immunizations from health care providers.

Health assessment results and recommendations signed by the examining physician or authorized medical personnel shall be recorded on forms provided by the Connecticut State Board of Education and kept on file in the school the student attends. Upon written authorization from the student's parent or guardian, original cumulative health records shall be sent to the chief administrative officer of the school district to which such student moves and a true copy of the student's cumulative health records maintained with the student's academic records. The school nurse shall notify parents of any health related problems detected in health assessments and shall make reasonable efforts to assure that further testing and treatment is provided, including advice

on obtaining such required testing or treatment. The Medical Advisor and the Superintendent or designee should be notified regarding any unaddressed continuing health assessment concerns.

Students who are in violation of Board requirements for health assessments and immunizations will be excluded from school after appropriate parental notice and warning.

# **Vision Screening**

All students in grades K, 1, 3, 4 & 5 will be screened using a Snellen chart by the school nurse or school health aide. Additional vision screenings will also be conducted in response to appropriate requests from parents/guardians or professionals working with the student in question. Results will be recorded in the student's health record on forms supplied by the Connecticut State Board of Education, and the Superintendent or their designee shall ensure that a written notice to be given to the parent or guardian of each student found to have any defect of vision, with a brief statement describing such defect.

# **Hearing Screening**

All students will be screened for possible hearing impairments in grades K, 1, 3, 4, & 5. Additional audiometric screenings will be conducted in response to appropriate requests from parents/guardians or professionals working with the student. Results will be recorded in the student's health record on forms supplied by the Connecticut State Board of Education, and the Superintendent or their designee shall cause a written notice to be given to the parent or guardian of each student found to have any defect of hearing, with a brief statement describing such defect.

## **Postural Screening**

School nurses will screen all female students in grades 5 and 7 and male students in grade 8 or 9 for scoliosis or other postural problems. Additional postural screenings will also be conducted in response to appropriate requests from parents/guardians or professionals working with the student. Results will be recorded in the student's health record on forms supplied by the Connecticut State Board of Education, and the Superintendent or their designee shall cause a written notice to be given to the parent or guardian of each student found to have any postural defect or problem, with a brief statement describing such defect or disease.

# **Tuberculin Testing**

**NOTE:** The Connecticut Department of Public Health discourages routine TB testing of all students at school enrollment or for any of the required health assessment. It is recommended that students, at each mandated health assessment, be screened for their risk of exposure to TB. A child, determined to be at risk for exposure to TB should be required to be tested.

Students born in high risk countries who are entering schools in Connecticut for the first time should receive either a TST (tuberculin skin test) or an IGRA (interferon-gamma release assay

such as Quantiferon Gold or T-Spot). Anyone found to be positive shall have an appropriate medical management plan developed that includes a chest radiograph.

A test for tuberculosis should be performed if any of the following risk factors are identified:

- 1. birth in a high risk country of the world see list of countries in Appendix and do not have a record of a TST (tuberculin skin test) or IGRA (interferon-gamma release assay) performed in the United States;
- 2. travel to a high risk country, staying at least a week with substantial contact with the indigenous population since the previously required examination;
- 3. extensive contact with persons who have recently come to the United States since the previously required examination;
- 4. contact with persons suspected to have tuberculosis, or
- 5. lives with anyone who has been in a homeless shelter, jail or prison, uses illegal drugs or has an HIV infection.

### Immunizations/Vaccinations

No student will be allowed to enroll in district schools without vaccination against smallpox and adequate immunization against the following diseases:

- 1. Measles
- 2. Rubella
- 3. Poliomyelitis
- 4. Diphtheria
- 5. Tetanus
- 6. Pertussis
- 7. Mumps
- 8. Haemophilus influenzae type B
- 9. Hepatitis B
- 10. Varicella (Chickenpox)
- 11. Hepatitis A
- 12. Pneumococcal disease
- 13. Influenza

- 14. Meningococcal disease
- 15. Any other vaccine required by section 19a 7f of Connecticut General Statutes.

All students in grades K-12 are required to have received 2 doses of measles, mumps and rubella vaccine or serologic proof of immunity. Students entering kindergarten and seventh grade shall show proof of having received 2 doses of varicella vaccine, laboratory confirmation of immunity, or present a written statement signed by a physician, physician assistant or advanced practice registered nurse indicating the individual has had varicella based on family or medical history.

All seventh grade students must show proof of 1 dose of meningococcal vaccine and 1 dose of Tdap in addition to the completion of the primary DTP series.

Students shall be exempt from the appropriate provisions of this policy when:

- 1. They present a certificate from a physician, physician assistant, advanced practice registered nurse, or local health agency stating that initial immunizations have been given and additional immunizations are in process under guidelines and schedules specified by the Commissioner of Health Services; or
- 2. They present a CT Medical Exemption Certification Statement completed by the student's primary care provider.
- 3. They present a written statement from their parents or guardians that such immunization would be contrary to the religious beliefs of such child or his/her parents/guardians; such statement to be officially acknowledged by a notary public or a judge, a court clerk/deputy clerk, a town clerk, a justice of the peace, a Connecticut attorney, or a school nurse, and such religious exemption was granted prior to April 28, 2021 (by midnight April 27, 2021). Such student retains this exemption through grade twelve, even if the student transfers to another school in Connecticut; or

**Note:** To be eligible for such an exemption, a student: (a) must have been enrolled in school in Grades K-12 on or before midnight April 28, 2021; and (b) must have submitted a valid religious exemption prior to midnight, April 27, 2021. Students must meet both conditions in order to be eligible for a religious exemption.

4. In the case of a child enrolled in preschool or pre-kindergarten on or before April 28, 2021 whose parent/guardian appropriately submitted a statement necessary for the religious exemption shall have until September 1, 2022 to comply with Connecticut's required immunizations or within fourteen days after transferring to a different public or private school, whichever is later. The deadline for such preschool/pre-K student complying with the immunization requirements can be altered if the school/district is provided with a written declaration from the child's physician, physician assistant or advanced practice registered nurse recommending a different immunization schedule for the child.

- 5. In the case of measles, mumps or rubella, present a certificate from a physician, physician assistant or advanced practice registered nurse or from the Director of Health in such child's present or previous town of residence, stating that the child has had a confirmed case of such disease; or
- 6. In the case of Haemophilus influenza type B has passed his or her fifth birthday; or
- 7. In the case of diphtheria, tetanus and pertussis, has a medical exemption confirmed in writing by a physician, physician assistant or advanced practice registered nurse (per C.G.S. 19a-7f).

The school nurse will report to the local Director of Health any occurrence of State of Connecticut defined reportable communicable diseases.

**Note:** In the situation regarding the religious exemption, a child is considered enrolled in school on or before April 28, 2021 as a parent/guardian provides documentation, consistent with District policy, establishing that such child is eligible to attend school in the district in the current or upcoming school year based upon age and residency, and that the family intends for the child to do so, whether the District refers to eligibility as "registration" or "enrollment." Families that took such steps, on or before April 28, 2021, toward having children attend Kindergarten for the 2020-2021 school year would be considered enrolled in the District as a Kindergarten student. Such a student would be eligible for a religious exemption if the student also provided a valid religious exemption statement by midnight on April 27, 2021. (CSDE Guidance-5/25/21)

### **Oral Health Assessments**

Parents are encouraged to have oral health assessments for their child(ren) prior to public school enrollment, in grade 6, and in grade 9. Such assessment may be conducted by a dentist, dental hygienist, physician, physician assistant (PA), or an advanced practice registered nurse (APRN), if he or she is trained in conducting such assessments as part of a DPH-approved training program. When conducted by a dentist the oral assessment must include a dental examination. If another such provider conducts the assessment, it must include a visual screening and risk assessment.

A child's public school enrollment continued attendance shall not be denied for his/her failure to receive the oral health assessment.

The District may host a free oral health assessment event at which a qualified provider performs such oral health assessments. Parents/guardians will be given prior notice of such a free screening event providing the parents/guardians the opportunity to opt their children out of the assessment event. If the parent/guardian does not do so, the child must receive an assessment free of charge. The child is prohibited by the legislation from receiving any dental treatment as part of the assessment event without the parent's/guardian's informed consent.

The results of an oral health assessment shall be recorded on forms supplied by the State Board of Education. The provider performing the assessment must completely fill out and sign the form. Recommendations by the provider shall be in writing. For any child who receives an oral health assessment, the results must be included in the child's cumulative health record.

Appropriate school health personnel shall review the assessment results. If it is determined that a child needs further testing or treatment, the school nurse shall give written notice to the child's parent/guardian and make reasonable efforts to ensure that further testing or treatment is provided. Such efforts include determining whether the parent/guardian obtained the necessary testing or treatment for the child and, if not, advising the parent or guardian on how to do so. The results of the further testing or treatment must be recorded on the assessment forms and reviewed by school health personnel.

As with other school health assessments no records of oral health assessments may be open to public inspection; and each provider who conducts an assessment for a child seeking to enroll in a public school must provide the assessment results to the school district's designated representative and a representative of the child.

# Health Assessments/Interscholastic Sports Programs

Any student participating in an interscholastic sports program must have a health assessment, within the past thirteen months prior to the first training session for the sport or sports. After the initial examination, repeat examinations are required every year thereafter. Each participant in a sport program must complete a health questionnaire before participating in each sport.

The Interscholastic sports assessment must be completed by a license MD, DO, APRN, or PA. The results should be recorded on the CSDE Health Assessment record (the same one referred to above) with the medical provider indicating a student's ability to fully participate in the School's sports program.

## Health Assessments/Interscholastic Sports Programs

Coaches and physical education staff shall ensure appropriate monitoring of an athlete's physical condition.

#### **Student Medical Care at School**

School personnel are responsible for the immediate care necessary for a student whose sickness or injury occurs on the school premises during school hours or in school sponsored and supervised activities.

Schools shall maintain files of Emergency Information cards for each student. If a child's medical condition requires emergency care, 911 will be activated and the parent or guardian will be called by telephone by the nurse, the building Principal, or other personnel designated by the

Principal, and advised of the student's condition. In this event, the school district medical advisor will be notified of school district actions.

In circumstances when urgent medical care (non-emergency) is indicated, the parents/caregivers will be notified by the nurse, the building Principal or other personnel designated by the Principal, and advised of the student's condition.

Link to Connecticut State Physical Form:

https://portal.ct.gov/-/media/sde/school-nursing/forms/har3.pdf

(cf. 5142 - Student Safety)

(cf. 5141.4 - Reporting of Child Abuse and Neglect or Sexual Assault of Students)

(cf. 5141.5 - Suicide Prevention)

(cf. 6171 - Special Education)

Legal Reference: Connecticut General Statutes

10-203 Sanitation.

10-204 Vaccination.

10-204a Required immunizations (as amended by PA 15-174 and PA 15-242 and PA 21-6)

10-204c Immunity from liability

10-205 Appointment of school medical advisors.

10-206 Health assessments, as amended by PA 07-58, PA 11-179 and PA 18-168

10-206a Free health assessments.

10-207 Duties of medical advisers, (as amended by P.A. 12-198)

10-208 Exemption from examination or treatment.

10-208a Physical activity of student restricted; boards to honor notice.

10-209 Records not to be made public.

10-210 Notice of disease to be given parent or guardian.

- 10-212 School nurses and nurse practitioners.
- 10-212a Administration of medicines by school personnel.
- 10-213 Dental hygienists.
- 10-214 Vision, audiometric and postural screenings: When required; notification of parents re defects; record of results.
- 10-214a Eye protective devices.
- 10-214b Compliance report by local or regional Board of Education.
- 10-217a Health services for children in private nonprofit schools. Payments from the state, towns in which children reside and private nonprofit schools.

Federal Family Educational Rights and Privacy Act of 1974 (section 438 of the General Education Provisions Act, as amended, added by section 513 of P.L. 93-568, codified at 20 U.S.C. 1232g)

42 U.S.C. 1320d-1320d-8, P.L. 104-191, Health Insurance Portability and Accountability Act of 1996 (HIPAA)

PA 18-168 An Act Concerning the Department of Public Health's Recommendations Regarding Various Revisions to the Public Health Statutes, Sections 7-9, 539 & 540

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NORTH CANAAN BOARD OF EDUCATION

North Canaan, Connecticut