

## **Students**

### **Health Assessments and Immunizations**

The Board of Education recognizes the importance of periodic health assessments, including oral health assessments, according to state health regulations.

To determine health status of students, facilitate the removal of disabilities to learning, and find whether some special adaptation of the school program may be necessary, the Board of Education may request that students have health assessments.

The Board of Education adheres to those state laws that pertain to school immunizations and health assessments, including oral health assessments. It is the policy of the Board of Education to insure that all enrolled students are adequately immunized against communicable diseases. The Board may deny continued attendance in school to any student who fails to obtain the health assessments required under C.G.S. 10-206, as may be periodically amended.

The Board of Education shall annually designate a representative to receive reports of health assessments and immunizations from health care providers.

Parents wishing their children exempted or excused from health assessments must request such exemption to the Superintendent of Schools in writing. This request must be signed by the parent/guardian.

Parents/guardians wanting their children excused from immunizations on religious grounds (prior to kindergarten entry and grade 7 entry) must request such exemption in writing to the Superintendent of Schools if such immunization is contrary to the religious beliefs of the child or of the parent/guardian of the child. The request must be officially acknowledged by a notary public or a judge, a clerk or deputy clerk of a court having a seal, town clerk, a justice of the peace, a Connecticut-licensed attorney or a school nurse. It is the responsibility of the Principal to insure that each student enrolled has been adequately immunized and has fulfilled the required health assessments. The school nurse shall check and document immunizations and health assessments on all students enrolling in school and to report the status to the school principal. The school nurse shall also contact parents or guardians to make them aware if immunizations and/or health assessments are insufficient or not up-to-date. The school nurse will maintain in good order the immunizations and health assessment records of each student enrolled.

No record of any student's medical assessment may be open to the public.

As required, the district will report, beginning in October 2017 on a triennial basis, to the Department of Public Health and to the local health director the asthma data obtained through the required asthma assessments, including student demographics. Such required asthma diagnosis shall occur at the time of mandated health assessment at the time of enrollment in either grade six or seven. The district, as required, will also participate in annual school surveys conducted by the Department of Public Health pertaining to asthma.

## Students

### Health Assessments and Immunizations (continued)

The Superintendent of Schools and/or his/her designee shall give written notice to the parent/guardian of each student who is found to have any defect of vision or disease of the eyes, with a brief statement describing such defect or disease and a recommendation that the student be examined by an appropriately licensed optometrist or ophthalmologist.

Note: P.A. 18-168 requires boards of education to request that students have an oral health assessment prior to public school enrollment, in grade 6 or 7, and in grade 9 or 10. The legislation establishes related requirements on providers authorized to perform the assessments, parental consent assessment forms, and records access. The specifics are detailed in the administrative regulation pertaining to this policy.

(cf. 5111 Admission)

(cf. 5141.31 Physical Examinations for School Programs)

(cf. 5141 – Student Health Services)

Legal Reference: Connecticut General Statutes

- 10204a Required immunizations as amended by PA 96-244, PA 15-174 and PA 15-242
- 10-204c Immunity from liability
- 10-205 Appointment of school medical adviser
- 10206 Health assessments (as amended by June Special Session PA 01-1 and PA 18-168)
- 10-206a Free health assessments
- 10-207 Duties of medical advisors
- 10-208 Exemption from examination or treatment
- 10-208a Physical activity of student rest cites; board to honor notice
- 10-209 School nurses (as amended by P.A. 03-211)
- 10-212 School nurses
- 10-214 Vision, audiometric and postural screenings. When required. Notification of parents re defects; record of results, as amended by PA 96-229 An Act Concerning Scoliosis Screening and P.A. 17-173.

Department of Public Health, Public Health Code, 10-204a, 10-204a-3a, 10-204a-4

## Students

### Health Assessments and Immunizations

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

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-1320d8. P.L. 104-191, Health Insurance Portability and Accountability Act of 1996 (HIPAA)

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Policy revised: March 22, 2012  
Policy revised: December 17, 2015  
Policy revised: December 21, 2017  
Policy revised: December 20, 2018

MARLBOROUGH PUBLIC SCHOOLS  
Marlborough, Connecticut

## Students

### Minimum Immunization Requirements

Proof of immunization shall be required prior to school entry. This immunization verification is mandatory for all new school enterers and must include complete documentation of those immunizations requiring a full series. A required immunization record includes:

<p><b>PreSchool</b> (children entering after age 3 but before age 5)</p>	<p><b>DTaP</b> – 4 doses  <b>Polio</b> – 3 doses  <b>MMR</b> - 1 dose on or after the 1<sup>st</sup> birthday  <b>Hep B</b> - 3 doses, last dose on or after 24 weeks of age  <b>Varicella</b> - 1 dose on or after the 1<sup>st</sup> birthday or proof of immunity            Proof of immunity includes either 1) documentation of age appropriate immunizations considered to be one dose administered on or after the student’s 1<sup>st</sup> birthday, 2) serologic evidence of past infection, confirmed in writing by a physician, physician assistant or advanced practice registered nurse based on specific blood testing by a certified lab, or 3) statement signed and dated by a physician, physician assistant or advanced practice registered nurse indicating a child has already had varicella based on diagnosis of varicella or verification of history of varicella.  <b>Hib</b> - 1 dose on or after the 1<sup>st</sup> birthday  <b>Pneumococcal</b> - 1 dose on or after the 1<sup>st</sup> birthday  <b>Influenza</b> - 1 dose administered each year between Aug. 1-Dec. 31            (2 doses separated by at least 28 days required for those receiving flu for the first time)  <b>Hepatitis A</b> - 2 doses given six months apart, first dose on or after 1<sup>st</sup> birthday</p>
<p><b>Kindergarten</b></p>	<p><b>DTaP</b> - At least 4 doses. The last dose must be given on or after the 4<sup>th</sup> birthday.  <b>Polio</b> - At least 3 doses. The last dose must be given on or after the 4<sup>th</sup> birthday and before school entry.  <b>MMR</b> – 2 doses separated by at least 28 days. 1<sup>st</sup> dose on or after the 1<sup>st</sup> birthday.  <b>Hep B</b> – 3 doses, last dose on or after 24 weeks of age  <b>Varicella</b> – 2 doses separated by at least 3 months – 1<sup>st</sup> dose on or after the 1<sup>st</sup> birthday; or proof of immunity            Proof of immunity includes either 1) documentation of age appropriate immunizations considered to be one dose administered on or after the student’s 1<sup>st</sup> birthday, 2) serologic evidence of past infection, confirmed in writing by a physician, physician assistant or advanced practice registered nurse based on specific blood testing by a certified lab, or 3) statement signed and dated by a physician, physician assistant or advanced practice registered nurse indicating a child has already had varicella based on diagnosis of varicella or verification of history of varicella.  <b>Hib</b> – 1 dose on or after the 1<sup>st</sup> birthday for children less than 5 years old.            Children five and older do not need proof of Hib vaccination.</p>

## Students

### Minimum Immunization Requirements

<b>Grades 1-6</b>	<p><b>DTaP/Td/Tdap</b> - At least 4 doses. The last dose must be given on or after the 4<sup>th</sup> birthday. Students who start the series at age 7 or older only need a total of 3 doses.</p> <p><b>Polio</b> - At least 3 doses. The last dose must be given on or after the 4<sup>th</sup> birthday.</p> <p><b>MMR</b> – 2 doses separated by at least 28 days. 1<sup>st</sup> dose on or after the 1<sup>st</sup> birthday.</p> <p><b>Hep B</b> – 3 doses, last dose on or after 24 weeks of age</p> <p><b>Varicella</b> – 1 dose on or after the 1<sup>st</sup> birthday; or proof of immunity</p> <p>Proof of immunity includes either 1) documentation of age appropriate immunizations considered to be one dose administered on or after the student's 1<sup>st</sup> birthday, 2) serologic evidence of past infection, confirmed in writing by a physician, physician assistant or advanced practice registered nurse based on specific blood testing by a certified lab, or 3) statement signed and dated by a physician, physician assistant or advanced practice registered nurse indicating a child has already had varicella based on diagnosis of varicella or verification of history of varicella.</p>
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## Students

### Health Assessments and Immunizations

In accordance with Connecticut General Statutes 10-206, 10-204a, and 10-214, the following health assessment procedures are established for students in the district:

1) Proof of immunization shall be required prior to school entry. This immunization verification is mandatory for all new students and must include complete documentation of those immunizations requiring a full series. A required immunization record includes:

a) For new enterers who are under 12 years of age:

- 4 doses of DTP/Td (Diphtheria Pertussis Tetanus), DTaP is an acceptable vaccine in place of DTP. At least one dose of DTP is required to be administered on or after the 4<sup>th</sup> birthday for children entering school who are 60 months of age or older.  
  
(Pertussis immunization shall not be required after a student's sixth birthday).
- 3 doses of TOPV (Trivalent Oral Polio Vaccine). At least one dose of polio vaccine is required to be administered on or after the 4<sup>th</sup> birthday for children entering school who are 60 months of age or older. This then usually results in 4 doses in total.
- 2 doses of MMR vaccine (measles, mumps and rubella) one dose at 1 year of age or after and a second dose prior to school entry OR measles disease protection. (confirmed in writing based on specific blood testing conducted by a certified laboratory).
- 3 doses of Hepatitis B vaccine (HBV) or confirmed blood test (for any individual born January 1, 1994 or later).
- 1 dose of HiB (Hemophilus Influenza type b) is required of all school children who enter school prior to their fifth birthday or had a laboratory confirmed infection at age 24 months or older, confirmed in writing by a physician.
- 1 dose of Varivax (Varicella Zoster Virus Vaccine for chicken pox) or proof of immunity.

## Students

### Health Assessments and Immunizations (continued)

- b) For new students who are 12 years of age or older:
- 3 doses of Td,
  - 3 doses of TOPV,
  - 1 dose of live measles vaccine (1 year of age or after) OR measles disease protection (confirmed in writing by specific blood testing conducted by a certified laboratory).
  - 1 dose of live mumps vaccine OR mumps disease (confirmed in writing by physician lab).
  - 2 doses of Varivax ( Varicella Virus Vaccine for chicken pox) or evidence that the child has had the virus.

Immunization requirements are satisfied if a student:

- i) presents verification of the above mentioned required immunizations;
- ii) presents a certificate from a physician or a local health agency stating that initial immunizations have been administered to the child and additional immunizations are in process;
- iii) presents a certificate from a physician stating that in the opinion of the physician, immunization is medically contraindicated because of the physical condition of the child;
- iv) presents a statement from the parent/guardians of the child that such immunization would be contrary to religious beliefs of the child or his/her parents or guardians;
- v) he/she has had a natural infection confirmed in writing by a physician or laboratory.

Health assessment and health screening requirements are waived if the parent, legal guardian of the student or the student notifies the school personnel in writing that the parent, guardian or student objects on religious grounds.

Students failing to meet the above requirements shall not be allowed to attend school.

## Students

### Health Assessments and Immunizations (continued)

2) A physical examination including blood pressure, height, weight, hematocrit or hemoglobin, and screenings for hearing, vision, speech, and gross dental shall be required for all new students, and students in grade 6. A chronic disease assessment which shall include, but not limited to, asthma and which must include public health related screening questions for parents to answer and other screening questions for providers shall be required for all new school enterers and students in grade 6. This health assessment must be completed either prior to school entry or 30 calendar days after the beginning of school for new school enterers. This assessment must be conducted within the school year for students in grade 6. Parents/guardians of students in grade 6 shall be notified, in writing, of the requirement of a health assessment and shall be offered an opportunity to be present at the time of assessment.

Health assessments completed within one calendar year of new school entry or grade 6 will be accepted by the school system. Failure of students to satisfy the above mentioned health assessment timelines and/or requirements shall result in exclusion from school.

The assessment shall also include tests for tuberculosis, sickle cell anemia or Cooley's anemia and test for lead levels in the blood when the Board of Education, after consultation with the School Medical Advisor and the local Health Department, determine such tests are necessary.

A test for tuberculosis, as indicated above, is not mandatory, but should be performed if any of the following risk factors prevail:

1. birth in a high risk country of the world (to include all countries in Africa, Asia, the former Soviet Union, Central and South America, Dominican Republic, Haiti, Eastern Europe and the Middle East);
2. travel to a high risk country;
3. regular contact with persons from a high risk country;
4. contact with persons suspected to have tuberculosis or related to anyone with a positive TB test;
5. contact with any adult with HIV infection, homelessness, illicit drug use, migrant farm work, incarceration, or institutionalization (nursing home, etc.);
6. have been living in foster care, incarceration or a long-term care facility, or
7. have HIV infection.



## Students

### Health Assessments and Immunizations (continued)

3) Parents/guardians of students being excluded from school due to failure to meet health assessment requirements shall be given a thirty calendar day notice in writing, prior to any effective date of school exclusion. Failure to complete required health assessment components within this thirty day grace period shall result in school exclusion. This exclusion shall be verified, in writing, by the Superintendent or his/her designee. Parents/guardians of excluded students may request administrative hearing of a health assessment-related exclusion within five days of final exclusion notice. An administrative hearing shall be conducted and a decision rendered within fifteen calendar days after receipt of request. A subcommittee of the Board of Education shall conduct an administrative hearing and will consider written and/or oral testimony offered by parents and/or school officials.

4) Health screenings shall be required for all students according to the following schedule:

Vision Screening	Grades K-6	Grades K, 1, 3, 4 & 5
Audiometric Screening	Grades K-3, 5	Grades K, 1, 3, 5, & 5
Postural Screening	Grades 5, 6	Female students: Grades 5 & 7 Male students: Grades 8 or 9

Health assessments may be conducted by a licensed physician, advanced practice registered nurse, registered nurse, physician assistant or by the School Medical Advisor.

The school system shall provide these screenings to students at no cost to parents. Parents/guardians shall be provided an annual written notification of screenings to be conducted. Parents/guardians wishing to have these screenings to be conducted by their private physician shall be required to report screening results to the school nurse.

5) Parents/guardians of students failing to meet standards of screening or deemed in need of further testing shall be notified by the Superintendent.

The Superintendent of Schools and/or his/her designee shall give written notice to the parent/guardian of each student who is found to have any defect of vision or disease of the eyes, with a brief statement describing such defect or disease and a recommendation that the student be examined by an appropriately licensed optometrist or ophthalmologist.

Students eligible for free health assessments shall have them provided by the Health Services staff. Parents/guardians of these students choosing to have a health assessment conducted by medical personnel outside of the school system shall do so at no cost to the school system.

6) Health records shall be maintained in accordance with Policy #5125.

**Students**

**Health Assessments and Immunizations** (continued)

(cf. 5141 – Student Health Services)

- Legal Reference: Connecticut General Statutes
- 10-204 Vaccination
  - 10-204a Required immunizations
  - 10-204c Immunity from liability
  - 10-205 Appointment of school medical advisor
  - 10-206 Health Assessments (as amended by June Special Session PA 01-4 and PA 01-9)
  - 10-206a Free health assessments (as amended by June Special Session PA 01-1)
  - 10-207 Duties of medical advisors
  - 10-208 Exemption from examination or treatment
  - 10-208a Physical activity of student rest cites; board to honor notice
  - 10-209 School nurses
  - 10-212 School nurses
  - 10-214 Vision, audiometric and postural screenings. When required. Notification of parents re: defects; record of results, as amended by PA 96-229, An Act Concerning Scoliosis Screening and PA 15-215, An Act Concerning Various Revisions and Additions to the Education Statutes and PA 17-173.

Regulation approved:	March 22, 2001	MARLBOROUGH PUBLIC SCHOOLS
Regulation revised:	October 24, 2002	Marlborough, Connecticut
Regulation revised:	December 17, 2015	
Regulation revised:	May 25, 2017	
Regulation revised:	December 21, 2017	

**MARLBOROUGH PUBLIC SCHOOLS**  
**Marlborough, Connecticut**

**Exemption From Immunizations**

To Whom It May Concern:

As the parent(s)/guardian(s) of \_\_\_\_\_  
*Name of student*

I/we hereby assert that immunization of this child would be contrary to the religious beliefs of this child. Therefore, this child shall be exempt from the required immunizations under Section 10-204a of the Connecticut General Statutes and shall be permitted to attend school except in the case of a vaccine preventable disease outbreak in the school.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature Parent/Guardian

\_\_\_\_\_  
Signature Parent/Guardian

Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_