

SECTION 10
Student Health Policies
School Board Policy – 5.18 Health Services

The Board believes that healthy children promote a better learning environment, are more capable of high student achievement, and will result in healthier, more productive adults. Therefore, the goal of the District's health services is to promote a healthy student body. This requires both the education of students concerning healthy behaviors, and providing health care services to pupils.

While the school nurse is under the supervision of the school principal, the delegation of health care duties shall be in accordance with the Arkansas Nurse Practice Act and the Arkansas State Board of Nursing Rules Chapter Five: Delegation of Nursing Care.

Date Adopted:

Last Revised: June 2019

Illness

School Board Policy – 4.36 Student Illness/Accident

When a student visits the health room, the parent/guardian will be contacted (unless a student visits for a minor cut, scrap, or complaint. If we cannot reach the parent/guardian then the emergency contacts provided on the health information form will be notified. Failure to make verbal contact will result in a written note being sent home with the student.

This school does not resume responsibility, but does wish to provide the best service possible in an emergency. If the parent/guardian cannot be reached at the time of the emergency and if immediate observation or treatments is urgent in the judgment of the school authorities, I authorize and direct the school authorities to activate the community 911 system with emergency transportation to the local hospital or emergency facility most accessible.

If your child becomes ill while at school you will be requested to pick up your child immediately.

Date Adopted: Oct. 2010

Last Revised: June 2014

Accident Insurance (Student Voluntary Insurance)

Student Voluntary Insurance forms may be requested at the beginning of each school year through the principal's office. Parents have the option of taking out this insurance on their child.

Immunization

School Board Policy-4.57—Immunization

Definitions

“In process” means the student has received at least one dose of the required immunizations and is waiting the minimum time interval to receive the additional dose(s).

“Serologic testing” refers to medical procedure used to determine an individual's immunity to Hepatitis B, Measles, Mumps, Rubella and Varicella.

General Requirements

Unless otherwise provided by law or this policy, no student shall be admitted to attend classes in the District who has not been age appropriately immunized against:

- Poliomyelitis;
- Diphtheria;
- Tetanus;

- Pertussis;
- Red (rubella) measles;
- Rubella;
- Mumps;
- Hepatitis A;
- Hepatitis B;
- Meningococcal disease;
- Varicella (chickenpox); and
- Any other immunization required by the Arkansas Department of Health (ADH).

The District administration has the responsibility to evaluate the immunization status of District students. The District shall maintain a list of all students who are not fully age appropriately immunized or who have an exemption provided by ADH to the immunization requirements based on medical, religious, or philosophical grounds. Students who are not fully age appropriately immunized when seeking admittance shall be referred to a medical authority for consultation.

The only types of proof of immunization the District will accept are immunization records provided by a:

- A. Licensed physician;
- B. Health department;
- C. Military service; or
- D. Official record from another educational institution in Arkansas, or
- E. An immunization record printed off of the statewide immunization registry with the official Seal of the State of Arkansas.

The proof of immunization must include the vaccine type and dates of vaccine administration. Documents stating “up-to-date”, “complete”, “adequate”, and the like will not be accepted as proof of immunization. No self or parental history of varicella disease will be accepted as a history of varicella disease must be documented by a licensed physician, advanced practice nurse, doctor of osteopathy, or physician assistant. Valid proof of immunization and of immunity based on serological testing shall be entered into the student’s record.

In order to continue attending classes in the District, the student must have submitted;

1. Proof of immunization showing the student to be fully age appropriately vaccinated;
2. Written documentation by a public health nurse or private physician of proof the student is in process of being age appropriately immunized, which includes a schedule of the student’s next immunization;
3. A copy of a letter from ADH indicating immunity based on serologic testing; and/or
4. A copy of the letter from ADH exempting the student from the immunization requirements for the current school year, or a copy of the application for an exemption for the current school year if the exemption letter has not yet arrived.

Students whose immunization records or serology results are lost or unavailable are required to receive all age appropriate vaccinations or submit number 4 above.

Temporary Admittance

While students who are not fully age appropriately immunized or have not yet submitted an immunization waiver may be enrolled to attend school, such students shall be allowed to attend school on a temporary basis only. Students admitted on a temporary basis may be admitted for a maximum of thirty (30) days (or until October 1st of the current school year for the tetanus, diphtheria, pertussis, and meningococcal vaccinations required at ages eleven (11) and sixteen (16) respectively if October 1st is later in the current school year than the thirty (30) days following the student’s admittance). No student shall be withdrawn and readmitted in order to extend the thirty (30) day period. Students may be allowed to continue attending beyond the thirty (30) day period if the student submits a copy of either number 2 or number 4 above.

Students who are in process shall be required to adhere to the submitted schedule. Failure of the student to submit written documentation from a public health nurse or private physician demonstrating the student received the vaccinations set forth in the schedule may lead to the revocation of the student’s temporary admittance; such students shall be excluded from school until the documentation is provided.

The District will not accept copies of applications requesting an exemption for the current school year that are older than two (2) weeks based on the date on the application. Students who submit a copy of an application to receive an exemption from the immunization requirements for the current year to gain temporary admittance have thirty (30) days from the admission date to submit either a letter form ADH granting the exemption or documentation demonstrating the student is in process and a copy of the immunization schedule. Failure to submit the necessary documentation by the close of the thirty (30) days will result in the

student being excluded until the documentation is submitted.

Exclusion From School

In the event of an outbreak, students who are not fully age appropriately immunized, are in process, or are exempt from the immunization required to be excluded from school in order to protect the student. ADH shall determine if it is necessary for students to be excluded in the event of an outbreak. Students may be excluded for no fewer than twenty-one (21) days or even longer depending on the outbreak. No student excluded due to an outbreak shall be allowed to return to school until the District receives approval from ADH.

Students who are excluded from school are not eligible to receive homebound instruction unless the excluded student had a pre-existing IEP or 504 Plan and the IEP/504 team determines homebound instruction to be in the best interest of the student. To the extent possible, the student's teacher(s) shall place in the principal's office a copy of the student's assignments:

- For the remainder of the week by the end of the initial school day of the student's exclusion; and
- By the end of each school's calendar week for the upcoming week until the student returns to school.

It is the responsibility of the student or the student's parent/legal guardian to make sure that the student's assignments are collected.

Students excluded from school shall have five (5) school days from the day the student returns to school to submit any homework and to make up any examinations. State mandated assessments are not included in "examinations" and the District has no control over administering state mandated make-up assessments outside of the state's schedule. Students shall receive a grade of zero for any assignment or examination not completed or submitted on time.

Annually by December 1, the District shall create, maintain, and post to the District's website a report that includes the following for each disease requiring an immunization under this policy:

- The number of students in the District that were granted an exemption by the Department of Health from an immunization;
- The percentage of students in the District that were granted an exemption by the Department of Health from an immunization;
- The number of students within the District who have failed to provide to the public school proof of the vaccinations required and have not obtained an exemption for ADH;
- The percentage of students within the District who have failed to provide to the public school proof of the vaccinations required and have not obtained an exemption for ADH; and
- The percentage of a population that must receive an immunization for herd immunity to exist.

Cross References: 4.2---ENTRANCE REQUIREMENTS
4.7---ABSENCES
4.8---MAKE-UP WORK
4.34---COMMUNICABLE DISEASES AND PARASITES

Legal References: A.C.A. § 6-18-702
DESE Rules Governing Immunization Requirements in
Arkansas Public Schools
ADH Rules Pertaining to Immunization Requirements

Date Adopted: June 2014

Last Revised: June 2020

Contagious Disease

School Board Policy-4.34 Communicable Disease and Parasite

Students with communicable diseases or with parasites that are transmittable in a school environment shall demonstrate respect for other students by not attending school while they are capable of transmitting their condition to others. Students whom the school nurse determines are unwell or unfit for school attendance or who are believed to have a communicable disease or condition will be required to be picked up by their parent/guardian. Examples include, but are not limited to: Varicella (chicken pox), measles, scabies, **conjunctivitis (Pink Eye)**, impetigo, MRSA (Methicillin-resistant Staphylococcus aureus), streptococcal and

staphylococcal infections, ringworm, mononucleosis, Hepatitis A, B or C, mumps, vomiting, diarrhea, and fever (100.4 F when taken orally). A student who has been sent home by the school nurse will be subsequently readmitted after 24 hours of effective treatment or absence of **fever** (without the aid of fever reducing medication), diarrhea, and or vomiting. In some instances, a letter from a health care provider may be required prior to the student being readmitted to the school.

To help control the possible spread of communicable diseases, school personnel shall follow the District's exposure control plan when dealing with any blood borne, and airborne pathogens exposures. Standard precautions shall be followed relating to the handling, disposal, and cleanup of blood and other potentially infectious materials such as all body fluids, secretions and excretions (except sweat)/

In accordance with 4.57 – IMMUNIZATIONS, the District shall maintain a copy of each student's immunization record and list of individuals with exemptions from immunization which shall be education records as defined in policy 4.13. That policy provides that an education record may be disclosed to appropriate parties in connection with an emergency if knowledge of the information is necessary to protect the health or safety of the student or other individuals.

A student enrolled in the District who has an immunization exemption may be removed from school at the discretion of the Arkansas Department of Health during an outbreak of the disease for which the student is not vaccinated. The student may not return to school until the outbreak has been resolved and the student's return to school is approved by the Arkansas Department of Health.

Head Lice/pediculosis--The parents/guardians of students, who are found to have pediculosis (Head Lice), will be asked to pick up their child at the school immediately. The parents/guardians will be given information concerning the eradication and control of pediculosis. Before a student can be readmitted following an absence due to pediculosis/nits, the school nurse or designee shall examine the student to make sure they are free of any lice/nits. Students who continually have pediculosis/nits will be monitored closely before the student is readmitted each day. Screenings are conducted of students for pediculosis (Head Lice) as needed. The screenings shall be conducted in a manner that respects the privacy and confidentiality of each student.

When a child is sent home by the nurse/administration for nits or lice, the child will be excused for 24 hours. Any days afterwards will be considered unexcused and will apply toward the eight (8) days unexcused per semester. After 8 days of unexcused absences due to nits, DHS will be notified. When returning to school the parent(s)/guardian(s) must bring the child to school for a recheck. The students are not allowed to ride the bus until the recheck has been cleared.

Cross References: 4.2 Entrance Requirements
4.7 Absences
4.13 Privacy of Students' Records/Directory Information
4.57 Immunization

Legal Reference: A.C.A. 6-18-702
Arkansas State Board of Health Rules Pertaining To Immunization Requirement
Division of Elementary and Secondary Education Rules Governing Kindergarten Through 12th
Grade Immunization Requirements

Date Adopted: Oct. 2010

Last Revised: June 2019

Medication

School Board Policy – 4.35 Student Medications *Student Medication Form pg 151, Self-Medication pg 150, Glucagon pg 160, Albuterol pg 152, Epinephrine pg 153*

Prior to the administration of any medication, including any dietary supplement or other perceived health remedy not regulated by the US Food and Drug Administration, to any student under the age of eighteen (18), written parental consent is required. The consent form shall include authorization to administer the medication and relieve the Board and its employees of civil liability for damages or injuries resulting from the administration of medication to students in accordance with this policy. All signed medication consent forms are to be maintained by the school nurse.

Unless authorized to self-administer, students are not allowed to carry any medications, including **over-the-counter** (OTC)

medications or any dietary supplement or other perceived health remedy not regulated by the US Food and Drug Administration, while at school. The parent or legal guardian shall bring the student's medication to the school nurse. The student may bring the medication if accompanied by a written authorization from the parent or legal guardian. When medications are brought to the school nurse, the nurse shall document, in the presence of the parent, the quantity of medication(s). If the medications are brought by a student, the school nurse shall ask another school employee to verify, in the presence of the student the quantity of the medication(s). Each person present shall sign a form verifying the quantity of the medication(s).

All medications, including those for self-administration, must be in the original container and be properly labeled with the student's name, the ordering provider's name, the name of the medication, the dosage, frequency, and instructions for the administration of the medication (including times). Additional information accompanying the medication shall state the purpose for the medication, its possible side effects, and any other pertinent instructions (such as special storage requirements) or warnings. Schedule II medications that are permitted by this policy to be brought to school shall be stored in a double locked cabinet.

Students with an individualized health plan (IHP) may be given (OTC) medications to the extent giving such medications are included in the student's IHP.

The only Schedule II medications that shall be allowed to be brought to school are methylphenidate (e.g. Ritalin or closely related medications as determined by the school nurse), dextroamphetamine (Dexedrine), and amphetamine sulfate (e.g. Adderall or closely related medications determined by the nurse).

For the student's safety, no student will be allowed to attend school if the student is currently taking any other scheduled II medication than permitted by policy. Students who are taking scheduled II medications which are not allowed to be brought to school shall be eligible for homebound instruction if provided for in their IEP or 504 plans.

The district's supervising registered nurse shall be responsible for creating both on campus and off campus procedures for administering medications.

Students who have written permission from their parent or guardian and a licensed health care practitioner on file with the District may:

1. **Self-administer** either a rescue inhaler or auto-injectable epinephrine;
2. Perform his/her own blood glucose checks;
3. Administer insulin through the insulin delivery system the student uses;
4. Treat the student's own hypoglycemia; or
5. Possess on his or her person;
 - a. A rescue inhaler or auto-injectable epinephrine; or
 - b. the necessary supplies and equipment to perform his/her own diabetes monitoring and treatment functions.

Students who have a current consent form on file shall be allowed to carry and self-administer such medication while;

- In school;
- At an on-site school sponsored activity;
- While traveling to or from school; or
- At an off-site school sponsored activity.

A student is prohibited from sharing, transferring, or in any way diverting his/her medications to any other person. The fact that a student with a completed consent form on file is allowed to carry a rescue inhaler, auto-injectable epinephrine, diabetes medication, or combination does not require him/her to have such on his/her person. The parent or guardian of a student who qualifies under this policy to self-carry a rescue inhaler, auto-injectable epinephrine, diabetes medication, or any combination on his/her person shall provide the school with the appropriate medication, which shall be immediately available to the student in an emergency.

Students may be administered **Glucagon, insulin, or both** in emergency situations by the school nurse or, in the absence of the school nurse, a trained volunteer school employee designated as a care provider, provided the student has:

1. An IHP that provides for the administration of Glucagon, insulin, or both in an emergency situation; and

2. a current, valid consent form on file from their parent/guardian.

When the nurse is unavailable, the trained volunteer school employee who is responsible for a student shall be released from other duties during:

- A. The time scheduled for a dose of insulin in the student's IHP; and
- B. Glucagon or non-scheduled insulin administration once other staff have relieved him/her from other duties until a parent, guardian, other responsible adult, or medical personnel has arrived.

A student shall have access to a private area to perform diabetes monitoring and treatment functions as outlined in the student's IHP.

Emergency Administration of Epinephrine

The school nurse or other school employees designated by the school nurse as a care provider who have been trained and certified by a licensed physician may administer an epinephrine auto-injector in emergency situations to students who have a IHP developed under Section 504 of the Rehabilitation Act of 1973 which provides for the administration of an epinephrine auto-injector in emergency situations.

The parent of a student who has a authorizing IHP, or the student if over the age of eighteen (18), shall annually complete and sign a written consent form provided by the student's school nurse authorizing the nurse or other school employee certified to administer auto-injector epinephrine to the student when the employee believes the student is having a life-threatening anaphylactic reaction.

Students with an order from and a licensed health care provider to self-administer auto-injector epinephrine and who have written permission from their parent or guardian shall provide the school nurse an epinephrine auto-injector. This epinephrine will be used in the event the school nurse, or other school employee certified to administer auto-injector epinephrine, in good faith professionally believes the student is having a life-threatening anaphylactic reaction and the student is either not self-carrying his/her epinephrine auto-injector or the nurse is unable to locate it.

The school nurse for each District school shall keep epinephrine auto-injectors on hand that are suitable for the students the school serves. The school nurse or other school employee designated by the school nurse as a care provider who has been trained and certified by a licensed physician may administer auto-injector epinephrine to those students who the school nurse, or other school employee certified to administer auto-injector epinephrine, in good faith professionally believes is having a life-threatening anaphylactic reaction.

The school nurse for each District school shall keep anti-opioid injectors on hand. The school nurse, other school employee, volunteer, or student may administer anti-opioid in accordance with the District's procedures to a student who the school nurse, or other observer, in good faith believes is having an opioid overdose.

The school shall not keep outdated medications or any medications past the end of school year. Parents shall be notified ten (10) days in advance of the school's intention to dispose of any medication. Medications not picked up by the parents or legal guardians within the ten (10) day period shall be disposed of by the school nurse in accordance with current law and regulation.

(Nemo Vista): Medications which are prescribed to be given three (3) times a day will not be administered at school, the only exception will be those prescribed to be given at lunch.

Deviations from label directions will require a written provider's order.

The initial dose if a new medication must be given by the parent/guardian outside the school setting. A specific length of time may be required between the initial dose being given and the student's re-admittance. The school may withdraw authorization from medication administration for cause at any time following written notice to the parent/guardian.

Parents/guardians of students that require medication, and or treatments will be required to provide **current** documents from their child's health care provider. This includes but is not limited to individualized Health care plans (IHP) for asthmatics, food/insect allergies, diabetics, medications, and consent forms.

***Current – from the beginning of a school year to the end or as changes occur.**

Legal References: Ark. State Board of Nursing: School Nurse Roles and Responsibilities
Arkansas Department of Education and Arkansas State Board of Nursing Rules Governing the Administration of Insulin and Glucagon to Arkansas Public School Students with Diabetes
A.C.A. § 6-18-707
A.C.A. § 6-18-711
A.C.A. § 6-18-1005(a)(6)
A.C.A. § 17-87-103 (11)
A.C.A. § 20-13-405

Date Adopted: Oct. 2010

Last Revised: Jan. 2019

Special Menus

School Board Policy 4.50-SCHOOL Meal Modifications *Special Dietary Needs Form pg 163-164*

The district only provides modified meal components on menus to accommodate students with a disability. A parent/guardian wishing to request dietary accommodations for their student with a disability must submit to the district's Director of Child Nutrition a Certification of Disability for Special Dietary Needs Form completed by a State Licensed healthcare professional, which includes:

- Physicians, including those licensed by:
 - The Arkansas State Medical Board;
 - The Arkansas State Board of Chiropractic Examiners (Chiropractors);
 - The Arkansas Board of Podiatric Medicine (Podiatrists);
- Nurse Practitioners (APRNs in family or pediatric practice with prescriptive authority);
- Physician Assistants (PAs who work in collaborative practice with a physician); and
- Dentist.

The medical statement should include:

1. A description of the student's disability that is sufficient to understand how the disability restricts the student's diet;
2. An explanation of what must be done to accommodate the disability, which may include:
 - a. Food(s) to avoid or restrict;
 - b. Food(s) to substitute;
 - c. Caloric modifications; or
 - d. The substitution of a liquid nutritive formula.

If the information provided in the medical statement is unclear, or lacks sufficient detail, the district's Director of Child Nutrition shall request additional information so that a proper and safe meal can be provided.

When choosing an appropriate approach to accommodate a student's disability, the District will consider the expense and efficiency of the requested accommodations. The District will offer a reasonable modification that effectively accommodates the child's disability and provides equal opportunity to participate in or benefit from the program, which may include a generic version of a product.

Parents may file a grievance regarding the request for accommodations with the District's 504 Coordinator, who will schedule a hearing on the grievance to be held as soon as possible. The 504 coordinator shall provide a copy of the procedures governing the hearing, including that the parent has the right to be accompanied by counsel, and the appeal process upon request.

The district will not prepare meals outside the normal menu to accommodate a family's religious or personal health beliefs.

Legal References: Commissioner's Memo FIN-09-044
Commissioner's Memo FIN-15-122
Commissioner's Memo CNU-17-051
Commissioner's Memo CNU-18-008
Commissioner's Memo CNU-18-023
Commissioner's Memo CNU-18-025
7 CFR 210.10(g)

Date Adopted: June 2009

Last Revised: Feb. 2018

4.51---Food Service Prepayment

Meal Charges

The district does not provide credit for students to charge for meals, a la carte, or other food and beverage items available for purchase in the school food service areas. Meals, a la carte, or other food and beverage items may be purchased by either providing payment for the items at the time of receipt or by having a prepaid account with the District that may be charged for the items. Parents, or students choosing to do so, may pay in advance for meals, a la carte, or other food and beverage items through any of the following method:

- Submitting cash or check payment at the respective buildings.

A student's parents will be contacted by authorized District personnel regarding a student's prepaid account balance on a weekly basis as needed.

Alternative Meals

The District does not provide alternative meals for students.

Legal References: Commissioner's Memo CNU-17-003
Commissioner's Memo CNU-17-024
A.C.A. § 6-18-715

Date Adopted: January 2017

Revised Date: June 2019

Food Sharing

School Board Policy 4.58—FOOD SHARING AND ITS REMOVAL FROM FOOD SERVICE AREA

Food Sharing Table

In an effort to reduce waste food and to provide students access to healthy foods when possible, the District shall have in the district cafeteria a food sharing table located at the end of the service line. Prior to leaving the service line, students may place on or retrieve items from the table, at no additional charge, any of the following:

- Raw whole fruit traditionally eaten without the peel (e.g. bananas and oranges);
- Raw whole fruit traditionally eaten with the peel provided the fruit is wrapped to prevent contamination (e.g. apples and grapes);
- Raw whole vegetables provided the vegetable is wrapped to prevent contamination (e.g. carrot sticks);

- Milk; and
- Juice

Fruit and vegetables to be shared are to be placed into a designated container on the table. Milk and Juice to be shared are to be placed in an ice-filled cooler. Milk and juice may not be taken by another student unless the carton is unopened and was completely covered by ice while in the cooler. A student may not return to the table to place an item for sharing after the student has left the service line.

At all times, the sharing table will be under the supervision of the food service staff. Remaining items should be discarded at the end of the meal period, and no item may remain on the table for longer than four (4) hours.

Removing Food Items From the Food Service Area

No student shall remove school provided food items from the food service area at the end of the meal period, especially milk, juice, and other items requiring temperature controlled environments.

Except for food service workers as required by their job duties, District employees may only remove school provided food items from the food service area when required by a 504 plan or a student's IEP.

Legal References: Commissioner's Memo FIN 08-076
 Commissioner's Memo FIN 15-052

Date Adopted: June 2015

Physical Examinations or Screening

School Board Policy – 4.41 Physical Examinations or Screening *Screening Form pg 154*

. Nemo Vista conducts routine health screening such as hearing, vision, scoliosis, and height/weight measurements (BMI) due to the importance these health factors play in the ability of a student to succeed in school. The intent of the exams or screenings is to detect defects in hearing, vision, or other elements of health that would adversely affect the student's ability to achieve to his/her full potential.

The rights provided to parents under this policy transfer to the student when he/she turns eighteen (18) years old.

Except in instances where a student is suspected of having a contagious or infectious disease, parents shall have the right to opt their student out of the exams or screenings by using form 4.41F or by providing certification from a physician that he/she has recently examined the student.

Legal Reference: A.C.A § 6-18-701 (b), (c), (e)

Date Adopted: June 2009

Last Revised: June 2019