HEALTH SERVICES

School health services promote and safeguard the health of the school population. Certified school nurse/teachers in Chariho school clinics work collaboratively with students, parents, teachers, and other community and school professionals to remove health-related barriers to learning.

Health services include, but are not limited to:

- ► Evaluating student illness
- ▶ Administering first aid and CPR to students and staff
- ► Teaching first aid and CPR to school staff
- ► Teaching wellness to students and staff
- ▶ Providing health promotion and screening programs
- ▶ Providing an effective communicable disease information and alert program
- ▶ Administering physician and dentist prescribed medications and treatments.
- ▶ Performing special procedures in school
- ▶ Identifying health problems which may interfere with learning
- ► Assessing the unique health needs of students
- ► Counseling students regarding potential or identified health problems and participating in team meetings.
- ▶ Reporting and monitoring of communications for the Department of Health.

The Chariho School District follows the Rules and Regulations for School Health Programs promulgated by the Rhode Island Department of Education. A complete copy is available in the school nurse-teacher's office.

All teachers shall report to the principal and/or the school nurse any unusual behavior, changes in physical appearance, changes in attendance habits, and changes in scholastic achievement which may indicate impairment of the child's health.

Health Examinations

It is the policy of the Chariho Regional School District Committee that:

- 1. Every student who has not been previously enrolled in a school in Rhode Island must have a medical history and physical examination completed, signed, and results submitted to the certified school nurse-teacher prior to entry into a school in the Chariho Regional School District.
- 2. This examination, if conducted in the twelve (12) months preceding the date of entry into the Chariho schools, is acceptable.
- 3. Evidence of immunizations must also be provided and must meet current State of Rhode Island immunization requirements.
- 4. Further, results of the medical examination will be complete, age appropriate, and will include specific body system information, as well as information about the child's health and well-being, and any challenges to the child's success in school and school-related activities.
- 5. A second health examination and clearance, including immunization update, is required upon entry to the 7th grade. This general health examination and immunization update may be performed during the 6th grade, but must be submitted for 7th grade entry.

Medication Protocol

- 1. Except in the case of an emergency situation, only certified school nurse-teachers or parents are authorized to dispense medication to students within the school building.
- 2. In no instance can a parent or legal guardian delegate to another person neighbor, relative, friend the authority to come into the school to administer medication.
- 3. No student is allowed to transport medication to and from school, with the exception of emergency medications. All other medications must be transported to and from schools by the parent or another adult.
- 4. FDA-approved prescription and non-prescription medication that comply with both state and federal law will be dispensed by the school nurse-teacher only when: a) received by the school nurse-teacher in the original labeled container from the pharmacy, b) requested in writing by the attending physician, and c) authorized, in writing, by the parent or legal guardian of the student.
- 5. Inhalers, epinephrine auto-injectors (Epipens), and/or insulin may be self-carried and self-administered with written authorization from the parent, physician and certified school nurse-teacher.
- 6. Regarding field trips: Epipens, inhalers, and insulin may be carried by the teacher or designated adult unless written authorization from a physician and parent states otherwise. A teacher or designated adult will carry other prescription medications after being dispensed by a school nurse-teacher into a properly labeled container. When a medication is due, the student will self-administer these medications with adult supervision. If the student is unable to self-administer the medication, the teacher or designated adult may administer.
- 7. In an emergency life-threatening situation, all school personnel are authorized to administer medication.

Medical and Dental Examinations

The school physician shall be assisted by a school nurse-teacher, technician or trained assistant, and every school dentist by a dental hygienist or trained assistant, who shall be present during each examination.

Parents or guardians of students shall be advised in advance of examination dates and screenings.

Any student may furnish school officials with a medical or dental report of examination made at his/her own expense by his/her family physician or family dentist.

Recommendations as to medical or dental care shall be sent to each parent or guardian with instructions to the parent or guardian to consult the family physician or dentist, and to notify the school of the action taken with respect to the recommendation.

Communicable Diseases and Exclusions

A school nurse-teacher shall have the authority to exclude any child showing an unusual skin eruption, sore throat, disease of the eyes, or any other communicable disease. A physician should be consulted as soon as possible.

A child excluded on account of having, or being suspected of having, a disease for which isolation is required shall not be readmitted until he or she presents a certificate to the nurse from a physician stating that the condition was not communicable, or that recovery is complete.

The school nurse-teacher may designate an absence as 'exempt' when a child is dismissed from school due to fever or other apparent or documented illness.

Pediculosis (Head Lice)

Chariho Regional School District, in agreement with the Rhode Island Department of Health's *Head Lice: Guiding Principles for School Policy*, the American Academy of Pediatrics, the National Association of School Nurses, and the Centers for Disease Control, recognizes that head lice, a common problem among school-children, are not a medical or public health hazard as they are not known to spread disease. However, since the condition can be transmitted to others, proper and successful treatment is essential. Research has shown that screenings in school do little to reduce the incidence of head lice, which is primarily spread by direct head-to-head contact. Pediculosis is best prevented when parents check their children throughout the school year at home. The school community will work cooperatively with families, using approaches recommended by public health and medical experts. Up-to-date resources on prevention, identification and treatment of head lice will be available from the school nurses and shared through school communications.

The management of pediculosis should not disrupt the educational process, and the protocol listed below will be followed:

- 1) If it is suspected that a student has head lice, the student will be referred to the school nurse.
- 2) The school nurse will contact the parents/guardians of any student found with live head lice or nits. The parents may remove the student, but the parent will not be required to do so. Because no disease process is associated with head lice, students will not be excluded from school.
- 3) The school nurse will provide information on the identification and life cycle of head lice, as well as guidance on treatment. The family is encouraged to contact their medical provider for recommendations and advice. If a family is unable to afford lice treatment, the school district will step in with assistance if the family demonstrates a financial need.
- 4) On return to school, the student must be accompanied by a parent/adult and report to the nurse's office for a head check and to review the treatment plan, including a recommendation to treat one week after initial treatment is given. If the student has siblings, siblings will be checked as well. The parent will be given instruction on how to prevent reinfestation (including the cleaning of bedding, furniture, stuffed animals, brushes, hats, etc.). A student who has some remaining nits after treatment may stay in school. Both live and dead nits look the same, and the presence of nits does not indicate active lice. The focus for the family will be on following treatment instructions exactly, and on checking and combing the child's hair daily for the next 10-14 days at home.
- 5) If the nurse examines the student when they return after being treated and find live lice, return to step #2 of this process.
- 6) The school nurse will re-check the student at weekly intervals for two weeks and as needed. A student with nits (egg cases which attach to a strand of hair) is permitted to attend school while treatment is occurring.
- 7) Confidentiality must be maintained. If more than one case is confirmed in a class, parents in that class will be notified and advised to conduct regular head checks. Environmental measures such as separating headgear and jackets may be implemented. The school nurse will continue to monitor the classroom for cases of lice until the problem is resolved. In the case of persistent issues, the building principal will consult with the district physician regarding the need for additional steps and further parent communication.

Health Records

For each student, a comprehensive health record shall be maintained by the school nurse, which shall include the results of tests, measurements and regularly scheduled examinations and special examinations.

Medical questionnaires suitable for diagnostic purposes and completed by the student or student's parents or guardian, shall become part of the child's health record.

All health records shall be considered confidential and their contents shall be divulged only when necessary for the health of the child or at the request of the parent or guardian to a physician legally qualified to practice medicine.

Employment of School Health Personnel

The school district shall provide the services of a school physician and a school dentist. For special examinations, the school district may employ licensed medical specialists.

The school district may employ dental hygienists and such other technical and clerical personnel as are necessary to carry out the provision of health services.

Duties of School Physician

Duties of the school physician shall include:

- 1. Physical examination of all students in grades where required and of all sports participants.
- 2. Recommendations as to medical and/or surgical care shall be sent to the parent or guardian and the family physician.
- 3. Authority over whether students may participate in extracurricular athletics.
- 4. Approval of the return of students who have been absent due to contagious disease or suspected contagious disease if approval is not provided by another physician.
- 5. Recommendation and approval for changes in district illnesses and accident protocols based on an annual review of same with school nurse-teachers.
- 6. Consultation when needed.

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