

Farmingdale Union Free School District

50 Van Cott Avenue
Farmingdale NY, 11735

THE GOAL OF THE FARMINGDALE PUBLIC SCHOOLS IS TO ESTABLISH OURSELVES AS A HIGH ACHIEVING SCHOOL DISTRICT AS EVIDENCED BY HIGH LEVELS OF STUDENT PERFORMANCE IN ALL AREAS.

Board of Education Regular Meeting
May 3, 2017

EXECUTIVE SESSION, 6:15 P.M. – A. TERRY WEATHERS BOARD ROOM

It is anticipated that upon a majority vote of the total membership of the Board, a motion to meet in Executive Session to discuss specific litigation, collective bargaining, and personnel issues in accordance with Open Meetings Law will be considered. Following the Executive Session the Board will reconvene in the Howitt East Cafeteria at approximately 8 p.m.

BOARD OF EDUCATION RECOGNITION CEREMONY, 7:30 P.M

Howitt Auditorium

PUBLIC MEETING, 8:00 P.M.

Howitt East Cafeteria

The Board of Education is interested in encouraging all members of the public to share their ideas, comments and questions. Public participation opportunities will be available at the beginning and end of this meeting and, as stated in board policy, no person shall speak for more than three minutes and each period of public participation shall be limited to 30 minutes. If you have any questions or concerns regarding matters on the Agenda, it may be important for you to utilize the first public participation opportunity as the Board will act on those items immediately. Charges, complaints or challenges should follow procedures listed under Policies 1400, 1410 and/or 1440, which are included on the materials table. Thank you for your anticipated courtesy and cooperation. The agenda follows:

IN THE EVENT OF FIRE AND/OR IF YOU HEAR THE FIRE BELL, YOU MUST LEAVE THE BUILDING. PLEASE USE THE NEAREST EXIT, WHICH IS TO YOUR RIGHT IN THE BACK OF THIS ROOM.

Call to Order

Pledge of Allegiance

Superintendent's Update

- Budget Schedule
- BOND 2016 Update

Old Business

Public Participation

Board of Education Minutes

Motion made by _____, seconded by _____ to approve the minutes of

1. Minutes of Mar 29, 2017 Budget / Public Input
2. Minutes of Apr 5, 2017 Regular Meeting/Adopt Budget for Voter Approval
3. Minutes of Apr 19, 2017 Special Meeting
4. Minutes of Apr 20, 2017 Special Meeting-BOCES Budget Adoption / BOCES Vote

Board Correspondence

Board Committee Reports

Consideration of Consent Agenda:

Motion made by _____, seconded by _____ that the Consent Agenda consisting of Items I (a-h), II (a-d), and III (a-d) be approved as a whole with action recorded separately.

I. Business Report

a. Acceptance for File of Financial Reports

1. Acceptance of Treasurer's Report - March 2017
2. Acceptance of Revenue and Expenditure Report - March 2017
3. Acceptance of Extra Curricular Report - March 2017
4. Acceptance of Claims Auditor Report - March 2017

b. Approval of Contracts and Agreements

1. Approval of a Special Education Contract
2. Approval of Health & Welfare Services Agreements for Resident Students Attending Non Public Schools Outside of the District for the 2016-2017 School Year (Mineola, North Merrick & South Huntington)
3. Approval of Contract #31 with Nassau BOCES
4. Approval of SCOPE License Agreement for PSAT/SAT Preparatory Program
5. Approval of Agreement with Challenge Day
6. Approval of a One Year Extension Contract with Nesco Bus Maintenance, Inc.
7. Approval of an Agreement with Educational Bus, Inc. for Installation and Maintenance of Cameras on District Buses

c. Approval of Transfer of Funds - May 2017

d. Approval of Declaration of Obsolete Equipment - May 2017

e. Acceptance of a Donation to the Sports Rehabilitation Scholarship Fund

f. Approval of Transfer from Unappropriated Fund Balance to Increase the General Fund Appropriation for the 2016/17 School Year for the Purpose of Renovating the South Parking Lot at Farmingdale High School

g. Approval of Award of Bid - Reeds, Mouthpieces & Supplies

h. Approval of Award of Bid - Marching Band Uniform

II. Items for Action

- a. Approval of Textbook Adoption: Forensic Science 2E: Fundamentals and Investigations
- b. Approval of Policy #5280, Interscholastic Athletics
- c. Approval of Declaration of Obsolete Library Books
- d. Approval of the Superintendent's Contract

III. Superintendent's Report

- a. Personnel Items -- Instructional
- b. Personnel Items -- Non-Instructional
- c. Approval of Committee on Special Education Placements Report and Acceptance for File of Said Report
- d. Approval of Committee on Preschool Special Education Placements Report and Acceptance for File of Said Report

IV. Items For Discussion

- 1. Draft Policy #5420, Student Health Services

Public Participation

Adjournment



Mary E. Rogers, District Clerk

Student Health Services

The Board of Education recognizes that good student health is vital to successful learning and realizes its responsibility, along with that of parents, to protect and foster a safe and healthful environment.

The school shall work closely with students' families to provide detection and preventive health services. In accordance with law, the school will provide vision, hearing, dental inspection, and scoliosis screening. Problems shall be referred to the parents who shall be encouraged to have their family physician/dentist provide appropriate care.

The school nurse, Building Principal or designee, shall provide emergency care for students in accidental or unexpected medical situations. Each school in the district will include in its emergency plan a protocol for responding to health care emergencies, including anaphylaxis, and head injury. Parents/guardians will be notified of any emergency medical situation as soon as is practicable. Parents/guardians will receive notification of non-emergent medical situations that have been reported to the nurse in a timely manner.

In order to enroll in school a student must submit a health certificate within thirty (30) calendar days after entering school, and upon entering second, fourth, seventh and tenth grades. The examination, which must conform to state requirements, must have been conducted no more than twelve (12) months before the first day of the school year in question. If a student is unable to furnish the health certificate, the school will provide a physical examination by a licensed provider. A request for exemption from the physical examination, or the requirement to provide a health certificate, must be made in writing to the school principal or designee, who may require documents supporting the request.

The only basis for exemption is a claim that the physical examination is contrary to the parent or guardian's genuine and sincere religious belief(s), a physician will testify or certify that administering a vaccine will be detrimental to a student's health, or in the case of varicella, either a health care professional has provided documents that a student has already had varicella, or there is serologic evidence the student has immunity to varicella. The request for exemption must be in writing to the principal or his/her designee.

In order to enroll in school, students must also furnish documentation of required immunizations against certain communicable diseases, as set forth in state law and regulations, unless as aforementioned, a student is exempted from immunizations for medical or religious reasons as permitted by state law and regulation.

The Board recognizes that the State of New York may authorize and require the collection of data from health certificates in furtherance of tracking and understanding health care issues that affect children. The Board supports these efforts and expects

administrators to cooperate and to observe the appropriate laws and regulations in carrying out those responsibilities, including those that relate to student privacy.

In addition, students will be asked to provide a dental health certificate when they enroll in school and in accordance with the same schedule as the health certificate.

A permanent student health record shall be part of a student's cumulative school record and should follow the student from grade to grade and school to school along with his/her academic record. This record folder shall be maintained by the school nurse.

Communicable Diseases

It is the responsibility of the Board to provide all students with a safe and healthy school environment. To meet this responsibility, it is sometimes necessary to exclude students with contagious and infectious diseases from attendance in school. Students will be excluded during periods of contagion, as follows:

Chicken Pox: Students will be excluded until all lesions are scabbed.

Pediculosis: Students will be excluded until proof of treatment is presented to the nurse, and child will be reexamined in 7-10 days.

Conjunctivitis: Students will be excluded until physician's note indicates that the condition has been treated with proper medication.

Impetigo: Students will be excluded until proof with a physician's note of appropriate antibiotic therapy for 48 hours is submitted.

Scabies: Students will be excluded until a physician's note indicates that the condition has been treated satisfactorily.

Ringworm: Students will be excluded until a physician's note indicates that the condition has been treated with proper medications.

Hepatitis, Meningitis or Tuberculosis: Students will be excluded until a physician's note indicates that the student is no longer contagious.

Other Infectious or Contagious Diseases

In situations not covered above, the periods of exclusion will be determined by the school physician.

It is the responsibility of the Superintendent of Schools, working through district health personnel, to enforce this policy and to contact the New York State Department of Health and the County Board of Health immediately upon notification of an outbreak, even of one student, of a communicable disease.

Physical Examination of Student

At the end of each school year, the parent shall be notified that it is advisable for each entrant to have a physical for the coming year. For new entrants to the school district, and for children entering pre-kindergarten or kindergarten, 2nd, 4th, 7th and 10th grades, it is required by New York State law to have a physical examination. The report of the examination has to be submitted to the school nurse within thirty (30) days of entry to school. In the event that the parent/guardian fails to submit a

physician's certificate of medical examination, the child will be scheduled for a physical with the school physician, as required by law.

Vision and hearing testing shall be done on students, as per the guidelines of New York State laws.

Scoliosis exams and dental inspections shall also be done on students, as per guidelines of New York State laws.

Immunization Requirements

Under state Public Health Law 2164, in order to be enrolled in or attend district schools, children must be fully immunized against certain communicable disease. Those diseases are: poliomyelitis, mumps, measles, diphtheria, rubella, varicella (chicken pox), Haemophilus influenzae type b (Hib), pertussis, tetanus, pneumococcal disease, meningococcal disease, and hepatitis B. The Meningococcal vaccine is mandated for the following grades: 7th grade - one dose of Menveo or Menactra and a second (booster) dose at 16 years of age; and 12th grade - a second (booster) dose of Menveo or Menactra. (If your child had one dose at 16 years of age or older, a second dose is not necessary. Additionally, students entering Grade 6 need one booster of Tdap.

1. The identification of immunization status of all children in the school should be done by the school nurse with the supervision of the school physician.
2. The enforcement of the laws is to protect the children against preventable diseases and not to deny the rights of children for education.

"Fully immunized" means that the child has either (1) received the required vaccinations for these diseases as set forth in state regulations; (2) for measles, mumps, rubella, hepatitis B, poliomyelitis, or varicella only, shown immunity with a positive blood test for those disease antibodies; or (3) for varicella only, has had the disease, verified by a physician, nurse practitioner, or physician's assistant.

Immunization of Students

Evidence of immunization against the above mentioned communicable diseases shall be provided to the District in accordance with the acceptable methods of proof allowed by New York State law and regulations.

In the case of a transfer student from another school district, the cumulative health record shall be acceptable as proof of immunization.

A student who has not received one or more of the required immunizations can be by law, refused admission to school, unless one of the below-described exemptions are granted. However, when a child/family has shown a good faith effort to obtain the necessary proof, Public Health Law §2164 provides for the provision of a limited period of attendance, at the discretion of the school physician. The basic "grace period" is fourteen (14) days. Further, when the child is transferring from another state or country, the grace period may be extended to not more than thirty (30) days. A written notice of requirements and a deadline date for obtaining appropriate certificates should be given to the parent/guardian at the time of application for admission to school.

Admission of Students With Incomplete Immunizations

A child can be admitted to school if the parent can show acceptable proof that the child is "in the process of receiving" the required immunizations.

A child must have received at least one dose of each of the immunizations Tdap, Polio, MMR, Hep B and Varicella, and the parent must provide the date of appointment with a health facility for completion of the required immunizations.

The school should then allow the child to enter and attend school, but should maintain supervision until the process has been completed, or exclude the child if the parent fails to adhere to these requirements.

In the event that the parent fails to submit a proof of immunizations, the nurse and school physician shall advise the Principal of the school that the child is not in compliance with the law. The Principal shall then advise the Superintendent of Schools, in writing, about the exclusion of the child from school and inform the parent again of the law.

When a child is excluded from school for immunization reasons, the Building Principal shall notify the parent/guardian of their responsibility to have the child immunized, and the public resources available for doing so. The Principal shall also notify the local health authority of the child's name and address and the immunization(s) the child lacks, and shall cooperate with that authority to provide a time and place for the required immunization(s) to be administered.

District schools may access the New York State Immunization Information System (NYSIIS) or the New York City Citywide Immunization Registry (CIR) to verify the immunization history of students entering or registered in that school.

Exemptions

Medical exemptions may be issued if immunization is detrimental to a child's health. Medical exemptions must either be (1) the medical exemption form issued by the New York State Department of Health or the New York City Department of Health and Mental Hygiene, or (2) a statement signed by a physician licensed to practice medicine in New York State indicating the specific immunization, the medical contraindication, and the length of time the exemption is for. Medical exemptions must be reissued annually to remain valid. The Building Principal may require supporting documents for medical exemptions.

Religious exemptions may be granted by the district upon either (1) a signed and completed Request for Religious Exemption to Immunization created by the NYSED, or (2) a written and signed statement from a parent/guardian stating an objection to immunization because of genuine and sincere religious beliefs which prohibit immunization. The Building Principal may require supporting documents for religious exemptions.

Administering Medication to Students

The Board shall not be responsible for the diagnosis or treatment of student illness. The administration of prescribed medication to a student during school hours shall be permitted only when failure to take such medicine would jeopardize the health of the student, or the student would not be able to attend school if the medicine were not

made available to him/her during school hours. "Medication" will include all medicines prescribed by a physician.

Before any medication may be administered to or by any student during school hours, the Board requires:

1. A written note from the parent/guardian giving appropriate licensed school personnel permission to administer the medication to their child during school or for trained unlicensed personnel to assist their child in taking their own medication, and their written agreement to relieve the Board and its employees of liability for such administration of medication; and
2. A written order from a NYS licensed health care provider (e.g., physician, nurse practitioner or physician assistant) containing the following: student's name, the date and name of the medicine, dosage and time to be administered, and list of possible side effects.

Both documents shall be kept on file in the office of the school nurse.

Students are permitted to carry and apply sunscreen without a medical provider's order under the following conditions:

1. the sunscreen is used to avoid overexposure to the sun and not for medical treatment of an injury or illness, if sunscreen is required to treat a medical condition, the procedures for administering medication (above) apply;
2. the sunscreen is FDA approved for over the counter use; and
3. the student's parents or guardians provide written permission annually for the student to carry and use the sunscreen.

Permission slips and medical orders shall be kept on file in the office of the school nurse.

Students are permitted to self-administer medication under certain circumstances, in accordance with State law and regulation. A student is authorized to carry and use the following medications: rescue inhaler, epinephrine auto-injector, insulin, glucagon (and associated diabetes testing supplies), if the following conditions are met:

1. An authorized medical provider must provide written permission that includes an attestation that the student's diagnosis requires the medication; the student has demonstrated that he/she can self-administer the prescribed medication effectively; the name of the medication, the dose, the times when it is to be taken, the circumstances which may warrant use and the length of time during which the student may use it.
2. Written parental permission.

If a student is authorized to carry and use medication as described above, the parent/guardian is permitted to give extra medication and supplies that the district will maintain in accordance with the written directions submitted by the authorized medical provider. Such extra medication and supplies shall be readily accessible to the student.

Use of Albuterol Metered Dose Inhalers

The school stocks albuterol in the form of Proair HFA metered dose inhaler for students who are in need of emergency dosing when their personal prescription is empty. The district will develop procedures in collaboration with school health personnel that is approved by the district physician and the Board of Education.

Head Injuries/Concussion Management

Any student who is observed or is suspected of suffering a blow to the head, has fallen from any height or collides with another student or object, may have sustained a concussion. Symptoms of a concussion may appear immediately, or may become evident in a few hours or evolve and worsen over a few hours.

Therefore, staff who observe or learn of a student's head injury should accompany the student to the school nurse. The school nurse will evaluate the student and contact the parent/guardian/or ambulance based on assessment, signs and symptoms. Students who are suspected of suffering a blow to the head or are exhibiting symptoms will be removed from athletic activity and/or physical activity (PE class/recess) and observed until an evaluation can be completed by a medical provider.

If a student sustains a head injury or exhibits symptoms of a concussion outside of the school day, which are observed or learned of by staff, when a school nurse is not available, the student's parent/guardian and/or an ambulance/911 should be called by staff, and Central Administration should be notified.

Symptoms of a concussion include, but are not necessarily limited to:

Amnesia (e.g. decreased or absent memory of events prior to or immediately after the injury, or difficulty retaining new information)

Confusion or appearing dazed

Headache or head pressure

Loss of consciousness

Balance difficulty or dizziness, or clumsy movements

Double or blurry vision

Sensitivity to light and/or sound

Nausea, vomiting, and/or loss of appetite

Irritability, sadness or change in personality

Feeling sluggish, foggy, groggy or lightheaded

Concentration or focusing problems

Slowed reaction times, drowsiness

Fatigue and/or sleep issues (e.g. sleeping more or less than usual)

Seizures and/or slurred speech

Weakness or numbing in arms, legs, facial drooping

Dilated or pinpoint pupils and/or change in size of one pupil

Significant irritability

If any of these above symptoms occur, the school nurse or the building administration will call the student's parent/guardian and/or an ambulance/911, and Central Administration will be notified.

A student is prohibited from resuming participation in sports, physical education and recess until he/she is symptom free for not less than twenty-four (24) hours and has been evaluated by and received a written and signed authorization to return to physical activity from a licensed physician; in addition, the school district physician will review all documentation and provide clearance to resume participation in sports, physical education and recess at the appropriate time.

Life-Threatening Allergies and Anaphylaxis Management

The Board recognizes its role and responsibility in supporting a healthy learning environment for all students, including those who have, or develop, life-threatening allergies. The district will work cooperatively with the student, their parent/guardian and healthcare provider to allow the child to participate as fully and as safely as possible in school activities. When a student has a known life-threatening allergy reported on their health form or if the district has been informed by the parent of the presence of a life-threatening allergy, the district will assemble a team, which may include the parent, the school nurse, the child's teacher, the building principal and other appropriate personnel, which will be charged with developing an individual health care plan. The plan will be maintained by the school nurse. The plan will guide prevention and response. If the student is eligible for accommodations based upon the IDEA, and/or Section 504 or the Americans with Disabilities Act, the appropriate procedures will be followed regarding identification, evaluation and implementation of accommodations.

Training

Training to support the fulfillment of staff responsibilities in regard to student health services will be provided as part of the district's ongoing professional development plan and in conformity with Commissioner's regulations.

Cross-ref:

5191, Students with HIV-Related Illness

Ref:

Education Law §§901 et seq.; §305(42)

Public Health Law §§680; 2164

8 NYCRR Parts §136; 8 NYCRR §136.5

Adoption date: July 5, 1995; Revised: June 5, 2013; Revised: February 26, 2014

Student Health Services Regulation

A. Immunization

Under state Public Health Law 2164, in order to be enrolled in or attend district schools, unless exempted, children must be fully immunized against certain communicable diseases. Those diseases are: poliomyelitis, mumps, measles, diphtheria, rubella, varicella (chicken pox), Haemophilus influenzae type b (Hib), pertussis, tetanus, pneumococcal disease, meningococcal disease, and hepatitis B.

Parents must provide acceptable proof indicating required receipt of all vaccines in accordance with law and regulations. A child may be excluded from the immunization requirements based on a physician determined health reason or condition. This medical exemption must be signed by a physician licensed to practice in New York State. A child may also be excluded from the immunization requirements because the child's parent/guardian holds a genuine and sincere religious belief which is contrary to the practice of immunization.

The district will maintain a list of all students who have been exempted from immunization for medical or religious reasons, or who are in the process of receiving immunization, and shall exclude such students from school when so ordered by the Commissioner of Health, in the event of an outbreak in school of the vaccine-preventable diseases listed in Public Health Law 2164 and the first paragraph of this section.

A child will not be admitted to school or allowed to attend school for more than fourteen (14) days without an appropriate immunization certificate or acceptable evidence of immunization. This period may be extended to thirty (30) days on a case-by-case basis by the Building Principal if the child is transferring from another state or country and can show a good faith effort to get the necessary certification or other evidence of immunization.

When a student transfers out of the district, the parent/guardian will be provided with an immunization transfer record showing the student's current immunization status which will be signed by the school nursing personnel or the school physician. A transcript or photocopy of the immunization portion of the cumulative health record will be provided to the new educational institution upon request.

B. Administering Medication to Students in School

The administration of prescribed medication to a student during school hours is permitted only when the medication is necessary to allow the student to attend school or failure to administer the medication would seriously affect the student's health.

Parent(s) or guardian(s) must present the following information:

1. a written order from a NYS licensed health care provider (e.g. physician, nurse practitioner or physician assistant) containing the following information: student's

name, the date and name of the medicine, dosage and time to be administered, and list of possible side effects; and,

2. A written note from the parent/guardian giving appropriate licensed school personnel permission to administer the medication to their child during school or for trained unlicensed personnel to assist their child in taking their own medication

These documents will be kept on file in the nurse's office.

The school nurse shall develop procedures for the administration of medication, which require that:

1. all medications will be administered by a licensed person unless the child is a "supervised student" (able to self-administer with assistance and supervision) or an "independent student" (able to self-administer and self-carry);
2. medications shall be securely stored in the office and kept in their original labeled container, which specifies the type of medication, the amount to be given and the times of administration; the school nurse shall maintain a record of the name of the student to whom medication may be administered, the prescribing physician, the dosage and timing of medication, and a notation of each instance of administration; and
3. all medications shall be brought to school by the parent(s) or guardian(s) and shall be picked up by the parent(s) or guardian(s) at the end of the school year or the end of the period of medication, whichever is earlier. If not picked up within five days of the period of medication, the medication shall be discarded.

An adult must bring the medication to school in the original container. The administering staff member should clearly label the medication with the time to be given and dosage.

Sunscreen

Students are permitted to carry and apply sunscreen without a medical provider's order under the following conditions:

1. the sunscreen is used to avoid overexposure to the sun and not for medical treatment of an injury or illness, if sunscreen is required to treat a medical condition, the procedures for administering medication (above) apply;
2. the student's parents or guardians provide written permission annually for the student to carry and use the sunscreen;
3. the sunscreen is FDA approved for over the counter use; and
4. students will not be permitted to share sunscreen with other students.

The school nurse will keep written permission for students on file and develop procedures pertaining to this policy.

Administering medication on field trips and at after-school activities

Taking medication on field trips and at after-school activities is permitted if a student is self-directed in administering their own medication and the parent/guardian has signed

the requisite written permission. On field trips or at other after-school activities, teachers or other school staff may carry the medication so that the self-directed student can take it at the proper time.

If a student is going on a field trip but is not self-directed (i.e., fully aware and capable of understanding the need and assuming responsibility for taking medicine), then the district may:

- permit the parent or guardian to attend the activity and administer the medication.
- permit the parent to personally request another adult who is not employed by the school to voluntarily administer the medication on the field trip or activity and inform the school district in writing of such request.
- allow the student's health care provider to be consulted and, if he/she permits, order the medication time to be adjusted or the dose eliminated.

If no other alternative can be found, a school nurse or trained person must administer the medication.

Administering epi-pen in emergency situations

The administration of epinephrine by epi-pen has become an accepted and extremely beneficial practice in protecting individuals subject to serious allergic reactions.

Pursuant to Commissioner's regulations, registered professional nurses may carry and administer agents used in non-patient specific emergency treatment of anaphylaxis.

In addition, pursuant to SED guidelines, school nurses may provide training to unlicensed school staff in administering epi-pens, prescribed by a licensed prescriber, to a child who has been diagnosed with the potential for a severe reaction, in the event of the onset of a serious allergic reaction when a nurse is not available.

Use of Albuterol Metered Dose Inhalers (MDI)

Students diagnosed with asthma whose personal albuterol prescription is empty may receive an emergency dose of school-stocked albuterol under the following conditions:

- The student has a prescription ordering Albuterol MDI or nebulized Albuterol from their licensed health care provider which must include an order allowing the student to use the school's stocked Albuterol MDI if their personal prescription is empty;
- The student's parent/guardian must provide written permission for the student to be administered dosing from the school's stocked Albuterol MDI if their personal prescription is empty;
- The school's stock supply of Albuterol is not to be used in place of the parent/guardian providing the medication for their child to the school. The school's stock supply is for use only in the event that the student's personal supply is empty while awaiting the parent/guardian to provide the school with a new one; and

- The student must have their own labeled spacer, tubing and facemask, or mouthpiece provided by the parent/guardian that is used when administering their own or the school's stock Albuterol MDI.

Specific procedures will be developed by school health personnel that will outline the following:

1. The process for obtaining and replacing the stock Albuterol;
2. The maintenance and cleaning of the school's stock MDI and nebulizer; individual students' MDIs and spacers; and/or students nebulizer tubing, facemask or mouthpiece;
3. The protocol for informing parents that the school stock Albuterol was used; and
4. The protocol for informing parents/guardians of the need for replacement of their child's Albuterol medication along with any district imposed deadlines for doing so.

This procedure will be approved by the district medical director.

C. Student Medical Exams

In accordance with Sections 903 and 904 of the state Education Law, each student shall have a physical exam given by the school doctor or licensed health provider (including a physician, physician assistant or nurse practitioner) upon entrance to school and at grades pre-kindergarten or kindergarten, two, four, seven and ten. Findings are to be kept on record at the school on forms that can be obtained from the school nurse. In addition, the school will request a dental health certificate according to the same schedule.

A student may be excluded from the medical examination requirements because the child's parent/guardian holds a genuine and sincere religious belief which is contrary to medical examinations. The request for exemption must be in writing to the principal or his/her designee.

In the event that the student's medical history reveals that they have a known life-threatening medical condition, the school nurse, in conjunction with the family, student, child's teacher, and other appropriate staff, will develop and implement an individual health care plan which will guide prevention and response.

The district will work with students in the self-management of their life-threatening medical condition, by:

1. Adequately training staff involved in the care of the child.
2. Assuring the availability of the necessary equipment and/or medications.
3. Providing appropriately licensed and trained persons on school premises, as required by law.
4. Providing ongoing staff and student education.

D. Illness or Injury in School

If a student becomes ill or injured in school:

1. The nurse will determine if the student should receive further medical attention, remain in the health office or return to class.
2. The nurse will call the parent, guardian or designated emergency contact if he/she feels the student should go home. In general, a parent or guardian will pick up the student from school.
3. The nurse will contact the Building Principal if he/she feels the child should be transported by bus to the home. If there is to be a change in bus routing in order to carry the student to his/her home, that decision will be made by the administrator and the transportation supervisor. If the route is to be changed, the transportation supervisor shall inform the bus driver.
4. If no parent, guardian or designated emergency contact picks up the student at school, or if no parent/guardian or designated emergency contact will be home, the student will remain in the health office until such time as a parent, guardian or designated emergency contact becomes available to assume responsibility for the child or the parent/guardian provides written permission for the student to go home independently.
5. If the nurse determines that the child can return to class, but needed some type of medical attention (i.e., a bandage for a minor scratch, a brief rest, etc.), the nurse will notify the parent using the requisite district form.
6. The nurse will maintain appropriate records of all student visits.

E. Medical Emergency Record

All students shall have on file a medical emergency record which shall state the name and telephone numbers of the following:

1. the student's parent(s) or guardian(s) at home and work;
2. the student's emergency contacts;
3. the student's next of kin (if applicable);
4. a neighbor (if applicable);
5. the student's licensed health care provider;
6. preferred hospital;
7. any allergies or serious health conditions.

Students diagnosed with diabetes shall have a written diabetes management plan maintained as part of the student's cumulative health record. The management plan shall be developed in accordance with state regulation and district procedures. Students diagnosed with asthma or other respiratory disease requiring a rescue inhaler, students diagnosed with life-threatening allergy or diabetes may have an emergency action plan maintained as part of the student's cumulative medical record. The emergency action plan will be developed in accordance with State regulation and district procedures.

F. Student Return to School after Illness/Injury

In general, students should be symptom-free before returning to school and resuming normal activities. In some instances, students may be asked to provide a note from their licensed health care provider before they return to school or participate in the full range of school activities. The final decision to permit participation rests with the school physician. The Superintendent, in consultation with the school physician, nurse and other appropriate staff, will develop protocols to address a student's return to activities when there has been a serious illness or injury.

Adoption date: February 26, 2014