

Students

Student Health Services

Statement

The purpose of this policy is to familiarize parents and legal guardians of school-age children with the school district's health requirements. The Avon Board of Education (herein referred to as the Board) maintains as a basic principle that the primary responsibility for health services for students remains with the parents or legal guardians, the physician and other health professionals.

Guidelines

I. Health Assessments

A. Prior to Enrollment

1. Pre-School and Kindergarten

All entering pre-school and kindergarten students must show proof of a health assessment completed within the 12 months before entering school. All students must be immunized as required by Connecticut General Statutes.

2. New Entrants

a. Students transferring in must show evidence of a current health assessment consistent with Avon requirements and immunizations as required by Connecticut General Statutes, prior to starting school.

3. A student transferring from out of the country must have a health assessment completed by a U.S. licensed health care provider including an assessment for risk of TB prior to starting school.

4. Except in the case of a homeless child, exclusion from school will result if the student fails to comply with these provisions.

B. The health assessment must be documented on a State of Connecticut health assessment form by a legally qualified practitioner of medicine, an advanced practice registered nurse or registered nurse, a physician assistant or the school medical advisor. Exceptions to the immunization requirements can be granted under the following conditions:

1. The parent or legal guardian presents a physician's certificate that initial immunizations have been given and additional required immunizations are scheduled.

2. The parent or legal guardian presents a physician's written statement that the immunization would be medically contra-indicated because of the physical condition of the child.

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I. Health Assessments (continued)

3. The student presents a statement from the parent or guardian or a form from a religious official that immunizations would be contrary to the student's religious belief. The statement must be presented prior to enrollment and prior to entering 7th grade. However, the student may be excluded from school in order to control outbreaks of communicable diseases in accordance with the accepted epidemiological standards of practice.

C. Grades 6 and 10

Each student enrolled in grades 6 and 10 must show evidence of a health assessment before entering that grade. A health assessment performed between March 1 of fourth or eighth grade and May 31 of fifth or ninth grade will be accepted. The health assessment must be done by a legally qualified practitioner of medicine, an advanced practice registered nurse or registered nurse, a physician assistant or the school medical advisor and should include necessary immunizations as per Connecticut General Statutes. This assessment is a condition of enrollment and students who fail to provide this assessment will not be permitted to attend school.

D. Free Health Assessment Eligibility

1. Health assessments may be provided without charge to students entering grades 6 and 10 whose parents or guardians meet the eligibility requirements for the free and reduced lunch program.
2. Health assessments and immunizations may be provided without charge to students deemed homeless as defined under NCLB (the McKinney-Vento Homeless Assistance Act) whose parents or guardians meet the eligibility requirements for the free and reduced lunch program.
3. The Avon Board of Education may use existing community resources and services to provide health assessments.

E. Interscholastic Sports Health Assessments

1. Students in grades 7 through 12 who participate in interscholastic sports must have a sports health assessment completed every 13 months by a legally qualified practitioner of medicine, an advanced practice registered nurse or registered nurse, a physician assistant or the school medical advisor.

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I. Health Assessments (continued)

E. Interscholastic Sports Health Assessments

2. The sports health assessment must be documented on an Avon Public Schools “Pre-participation Sports Evaluation Form,” or the 2010 revised Health Assessment Record. The sports assessment form must be submitted to the school nurse prior to any participation or “try-out” session. The forms are available on the district web site under “High School Activities” and /or Health Services.
3. A sports health assessment may be provided to students without charge if the parents or guardians meet the eligibility requirements for the free and reduced lunch.
4. Students who are injured or become seriously ill while participating in an interscholastic sport to the degree of requiring a doctor's attention will not be allowed to participate in that interscholastic sport or other sports that year without written permission from their physician.

II. Vision, Audiometric and Postural Screenings

A. Vision

Each student in kindergarten through grade 5, will receive a vision screening using a Snellen chart, or equivalent screening.

B. Audiometric

Each student in kindergarten, grades 1 and 3-5 inclusive will receive an audiometric screening for hearing.

C. Posture

Each female student in grades 5 and 7, and each male student in grade 8 will receive an annual postural screening.

D. Report to Parents

The school nurse will notify the parent or guardian in writing if a screening reveals a defect of vision, disease of the eyes, impairment or defect of hearing, or evidence of a postural problem. The notice will contain a brief statement describing the defect or problem.

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Student Health Services (continued)

III. Administration of Medications in the Schools

In compliance with the Connecticut General Statutes, administration of medications by school personnel will be permitted to meet the health needs of individual students with chronic or short term health problems. With the authorization of the medical advisor, nasal naloxone will be available to be administered by the school nurse for a known or suspected opioid overdose. Parents will be notified of any emergency treatment provided.

Medications will be administered pursuant to the written order of an authorized prescriber and the written consent of the parent or guardian.

Medications in the schools will be administered by a licensed nurse (RN or LPN) or in the absence of a nurse, the following school personnel, who have been properly trained by a school nurse or school medical advisor:

1. Principals and teachers;
2. Licensed physical therapists (PT) or occupational therapists (OT) employed by the school district;
3. Directors or director's designees for school readiness programs and before-and after-school programs;
4. Paraprofessionals, in the case of a specific student with a medically diagnosed allergic condition that may require prompt treatment with an epinephrine cartridge injector and/or inhalant medication to protect the student against serious harm or death;
5. Coaches and licensed athletic trainers, during practices, games, and athletic activities, for student who are prescribed inhalant medications to treat respiratory conditions or students prescribed epinephrine cartridge injectors for a medically diagnosed allergic condition which may require prompt treatment to protect the student against serious harm or death.

A qualified school employee, who has been trained according to the medication regulations, may administer the following:

1. Epinephrine cartridge injectors for the purpose of emergency first aid to students who experience allergic reactions and do not have a prior written authorization of a parent or guardian or a prior written order of a qualified medical professional for the administration of epinephrine;
2. Anti-epileptic medication, including by rectal syringe;
3. A glucagon injection to a student with diabetes who may require prompt treatment to protect him/her from serious harm or death.

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III. Administration of Medications in the Schools (continued)

A. Documentation and Recordkeeping

1. Each school where medications are administered will maintain a medication administration record for each student who receives medication during school hours.
2. Entries in the medication record must be transcribed in ink and are not to be altered or shall be recorded electronically in a record that cannot be altered. The record will be filed in the student's cumulative health record.
3. Medication records will be made available to the State of Connecticut Department of Health Services upon request.
4. Prescriber orders, parental authorization and completed medication records will be filed in the student's cumulative health record.
5. For controlled drugs a medication count will be conducted weekly by the school nurse and a witness.
6. The completed medication administration for controlled drugs shall be maintained in the same manner as the non-controlled drugs. In addition, a separate medication administration record needs to be kept in the school for 3 years.
7. A prescriber's telephone order or fax, for a change in medication can be received only by the school nurse. Any such order must be followed by a written order, which may be faxed, within three school days.

B. Self-Administration of Medication

1. Those students with a verified chronic medical condition and who are deemed capable to self-administer prescribed emergency medication, including rescue asthma inhalers and cartridge injectors for medically-diagnosed allergies, may self-administer such medications, provided:
 - a. An authorized prescriber provides a written medication order including the recommendation for self-administration;
 - b. A parent or guardian or eligible student provides written authorization for self-administration of medications;
 - c. The school nurse has assessed the student's competency for self-administration in the school setting and deemed it safe and appropriate as per the self-administration assessment form.

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III. Administration of Medications in the Schools

B. Self-Administration of Medication (continued)

2. In the case of inhalers for asthma and cartridge injectors for medically-diagnosed allergies, the school nurse's review of a student's competency to self-administer shall not be used to prevent a student from retaining and self-administering such medications. Students may self-administer medication with only the written authorization of an authorized prescriber and written authorization from a student's parent or eligible student.
3. The school nurse will document the medication plan in the student's health record, and notify the principal and appropriate staff that the student is self-medicating.
4. Self-administration of controlled medication, as defined in Connecticut General Statute Section 10-212a-1 of the Regulations, may be considered for extraordinary situations, such as international field trips, and shall be approved by the school nurse supervisor and the school medical advisor in advance and an appropriate plan shall be developed.

C. Training of School Personnel, Connecticut General Statute 10-212a-3

1. Designated qualified staff in each building will receive training by the school nurse to administer medications for situations when the nurse is not immediately available.
2. Training will be conducted at least annually, and shall be documented according to Connecticut General Statute 10-212a-3.
3. In case of a life-threatening emergency, any Avon Board of Education trained employee may administer medications to a student and must contact 911 to activate emergency medical services.

D. Handling, Storage and Disposal of Medications

1. Handling, storage and disposal of medications will be as directed by Connecticut General Statute 10-212a.

E. Disciplinary Action When Students Fail to Comply

1. Any student who self-administers a medication without complying with the requirements of this section may be subject to disciplinary action in accordance with Connecticut General Statute 10-233a et. seq.

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Student Health Services

III. Administration of Medications in the Schools (continued)

F. Self-Administration of Medication

1. The school nurse is responsible for administration of medications and:
 - a. reviewing medication orders or changes in orders;
 - b. setting up a plan and schedule to administer medications providing consultation by telephone or other means of telecommunication;
 - c. implementing policies and procedures regarding receipt, storage and administration of medications;
 - d. reviewing monthly all documentation pertaining to the administration of medications for students.

G. Errors in Medication Administration

1. The following individuals will be notified of errors in medication administration:
 - a. the Poison Control Center as deemed necessary by the school nurse;
 - b. the student's parent or guardian;
 - c. the prescribing physician;
 - d. the building administrator;
 - e. the coordinating nurse, who will notify the school physician.
2. A medication error report will be completed using the appropriate incident form as authorized by the Avon Board of Education.
3. Any error in the administration of a medication will be documented in the student's cumulative health record.

IV. Enforcement of Health Policy

The Superintendent of Schools or his/her designee may prescribe procedures for the efficient administration and enforcement of this policy, and from time to time, alter procedures as changing conditions require.

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Legal Reference: Connecticut General Statutes
10-203 Sanitation.
10-204a Required immunizations, as amended by PA 15-174 & PA 15-242.
10-204c Immunity from liability
10-205 Appointment of school medical advisors.
10-206 Health assessments, as amended by PA 07-58 and PA 11-179.
10-206a Free health assessments.
10-207 Duties of medical advisers, as amended by P.A. 12-198.
10-208 Exemption from examination or treatment.
10-208a Physical activity of student restricted; boards to honor notice.
10-209 Records not to be public. (as amended by P.A. 03-211)
10-210 Notice of disease to be given parent or guardian.
10-212 School nurses and nurse practitioners.
10-212a Administration of medicines by school personnel.
10-213 Dental hygienists.
10-214 Vision, audiometric and postural screening: When required; notification of parents re defects; record of results. (As amended by PA 96-229 An Act Concerning Scoliosis Screening)
10-214a Eye protective devices.
10-214b Compliance report by local or regional Avon Board of Education.
10-217a Health services for children in private nonprofit schools. Payments from the state, towns in which children reside and private nonprofit schools.
Department of Public Health, Public Health Code – 10-204a-2a, 10-204a-3a and 10-204a-4
Federal Family Educational Rights and Privacy Act of 1974 (section 438 of the General Education Provisions Act, as amended, added by section 513 of P.L. 93-568, codified at 20 U.S.C. 1232g).
42 U.S.C. 1320d-1320d-8, P.L. 104-191, Health Insurance Portability and Accountability Act of 1996 (HIPAA)

Policy adopted: August 22, 2017

AVON PUBLIC SCHOOLS
Avon, Connecticut

Medication Administration

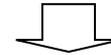
Qualified School Employee

- Principal
- Teacher employed by the district full time
- Licensed athletic trainer employed by the school district full time
- Licensed physical or occupational therapist employed by school district
- Coach of intramural and interscholastic sports
- School paraprofessional
- Before/After school programs director or director designee

Qualified School Employee Responsibilities:

- Annually complete training by Medical Director/ School nurse
- For glucagon and diastat administration, receive monthly reviews by school nurse
- Voluntarily agrees to serve as a qualified school employee

Qualified School Employee



Medication Training for Qualified School Employee

School nurses and school medical advisors may provide medication training for the following medications:

- Oral
- Topical
- Inhalant
- Intranasal
- Rectal Diastat
- Intramuscular glucagon
- Prefilled epinephrine auto-injector

Please note:

LPN's cannot delegate medication administration

May also administer:

Anti-epileptic medication, rectally or intra-nasally.

Automatic prefilled epinephrine auto injector for diagnosed life threatening allergy.

Automatic prefilled epinephrine auto injector for UNDIAGNOSED life threatening allergy. Must complete annual CPR/First Aid training as well as the basic medication administration training.

Please note:

At least one qualified school employee must be trained to administer epinephrine to an undiagnosed student that experiences anaphylaxis when the school nurse is absent or unavailable. This applies only during school hours and is not for field trips or before/after school events.

State of Connecticut
Department of Public Health
Religious Exemption Statement

(Printed full, legal name of student)

I, the undersigned, do hereby swear or affirm, as the case may be as follows:

1. I am making this Religious Exemption Statement pursuant to Connecticut General Statutes §10-204a so that the student may enroll in school for the first time or enter seventh grade at _____ school.
2. I am the lawful parent guardian of the student.
3. Immunizing said student would be contrary to student's parent's guardian's religious beliefs.
4. I understand that by claiming this exemption the student shall be exempt from the immunizations required by Connecticut General Statutes §10-204a and 19a-7f.
5. I understand that during a vaccine-preventable disease outbreak at the above-identified school, all susceptible children, including the student will be excluded from school if a public health official determines that the school is a significant site for disease exposure, transmission and spread into the community. In such case, such children, including the student shall be excluded from school until: (1) the public health official determines that the outbreak danger has ended; (2) the child becomes ill with the disease and completely recovers from it; (3) the child is vaccinated according to public health protocol; or (4) the child has proof of immunity to the disease.

Name(s) of Parents(s)

Signature of Parent(s)/Guardian(s)

Date

Name(s) of Parents(s)

Signature of Parent(s)/Guardian(s)

Date

Address (Street & House or Apt. #)

Telephone/Cell Phone Numbers

City, State and Zip Code

TO CLAIM A RELIGIOUS EXEMPTION, AN EXEMPTION FORM MUST BE SUBMITTED TO THE PUBLIC OR NON-PUBLIC SCHOOL BEFORE ENROLLING IN THE SCHOOL FOR THE FIRST TIME AND BEFORE ENTERING SEVENTH (7TH) GRADE.