



FREIRE CHARTER SCHOOL

STUDENT HEALTH POLICY (#211)

Date Adopted: 6/14/2017

INTRODUCTION

Freire Charter School (“the School”) recognizes that student health is a vital component in ensuring our students can perform at their fullest potential. The School shall make best efforts to substantially comply with 24 P.S. §1401 et seq. of the Public School Code of 1949 (“School Health Services”). Therefore, the School shall make best efforts to substantially comply with the relevant regulations promulgated by the Pennsylvania Department of Health, namely Title 28, Chapter 23 of the Pennsylvania Code.

The School intends for students enrolled at the School to receive the medical evaluations, health screenings, immunizations, and other health services therein, and the School will maintain records and submit reports required under applicable Pennsylvania statutes and regulations unless a waiver or modification has been granted by the Department of Health. The CEO of the School will arrange for the appointment of school health personnel and carry out or appoint designees to complete the responsibilities of a school administrator regarding school health under applicable Pennsylvania laws and regulations.

EXAMINATIONS AND SCREENINGS

MEDICAL AND DENTAL EXAMINATIONS

The School requires physical examinations upon entry to school, in sixth grade, and in eleventh grade. The School requires dental examinations upon entry to school and in seventh grade. Students transferred from other schools are required to be examined as soon as possible after the transfer regardless of their age or grade only if an adequate health record is not made available by the previous school or parent/guardian prior to admission. For new students entering in fifth or sixth grades, evidence of a dental examination in the third grade is required.

The school medical and dental examinations may be conducted by legally qualified physicians designated by a student’s parent or guardian and reported to the School on the forms published by the Department of Health. To provide for continuity in medical care, the School strongly encourages parents to exercise their right to have the student’s medical and dental examinations conducted by a family physician and dentist of their choosing and at their own expense. These examinations may be completed no more than one year prior to a student’s entry into the grade where an exam is required (pursuant to a blanket modification letter issued by the Secretary of Health on April 14, 2000). Entry is considered to occur on July 1.

In the event that the School must provide for examinations, they will be conducted carefully and in sufficient detail to command medical respect and to provide an educational experience. Examinations will be conducted in suitable facilities, with medical examinations scheduled to last no less than 15 minutes and dental examinations no less than 8 minutes. Parents/guardians will be notified in advance of the examination and afforded the right to be present. Results of vision and hearing screening tests will be available to the physician at the time of a medical examination.

Students may be excused from regular or special medical or dental examinations with written evidence to the School that the examinations are contrary to the religious beliefs of the parent/guardian. Furthermore, the School does not permit any discrimination against any person on account of such objections. However, exemptions from examinations will not be granted if the Department of Health finds that facts exist under

which the exemption constitutes a present substantial menace to the health of other persons exposed to contact with the unexamined person.

VISION SCREENING TESTS

The School ensures that vision screening tests are conducted annually for all students by a nurse, medical technician, or teacher following Department of Health requirements. Current procedures require near and far visual acuity tests for all students each year. Color vision, stereo/depth perception, and convex lens tests are required only for students with no record of previous screenings. (Convex lens is not required if a student has already failed the far visual acuity test.)

HEARING SCREENING TESTS

The School ensures that hearing screening tests are conducted by a nurse or medical technician. All tests will be conducted using equipment and at the frequencies and decibel levels specified or approved by the Department of Health. The School requires initial hearing screenings (also known as sweep check tests or rapid hearing screenings) in seventh grade and eleventh grade. New students without a health record indicating a test was performed in third grade will also receive initial screening.

Certain students must also be given threshold hearing tests. Students who fail an initial screening, who present a history of recurrent upper respiratory infection, who may evidence other possible ear, nose, and throat pathology, or who show by classroom behavior, speech pattern, or both, that a hearing difficulty may exist must undergo a threshold test. Once a student is known to have a hearing loss which meets or exceeds the criteria for otologic referral established by the Department of Health, that student must receive a threshold test annually.

GROWTH SCREENING

The School ensures that a nurse or teacher conducts height and weight measurements of all students annually following Department of Health requirements. The School will notify parents/guardians of the results of these screenings as interpreted using Department of Health guidelines.

SCOLIOSIS SCREENING TEST

The School ensures that students receive scoliosis screenings in sixth grade and seventh grade following Department of Health requirements. Students whose parents object in writing to scoliosis screening or who are under observation or care for scoliosis by a physician will be excused from the screening. Per guidance from the Department of Health, sixth grade students who receive a standard physical examination do not need to be re-screened by the School in that year.

STUDENT TUBERCULOSIS TESTS WAIVED

The Pennsylvania Public School Code, §1402(a)(4) requires that students be tested for Tuberculosis. However, in a letter of November 12, 1997, the Pennsylvania Department of Health advised that multiple organizations had recommended the elimination of requirements for routine tuberculin skin testing and invited the submission of modification requests. Pursuant to the Department recommendation, the Freire Charter School Board of Directors waives the requirement for students to be tested for Tuberculosis.

IMMUNIZATIONS

PROOF OF IMMUNIZATION

The School requires all students to submit records of immunization indicating they have received all mandated vaccinations prior to admission to ensure that students are immunized against diseases which spread easily in schools and interrupt school life and learning for individuals and groups. The School will inform all parents/guardians as early as possible, but no later than the time of registration, of immunization requirements and will ascertain the immunization status of all students prior to admission or continued attendance.

Ideally, parents/guardians will provide a completed Certificate of Immunization, the official Department of Health form signed by a health care provider, public health official, or school nurse. In the absence of a signed Certificate of Immunization, the parent/guardian must provide a record of immunization which indicates the month, day, and year that immunizations were given such as a baby book, Health Passport, family Bible, other state's official immunization document, International Health Certificate, immigration records, physician record, school health records, or other similar documents. This information will be recorded on a Certificate of Immunization and signed by a school official or the official's designee, or the details of the record will be stored in a computer database.

The School will maintain on file a Certificate of Immunization for every enrolled student, or transfer the immunization information from the certificate to a computer database. When a student withdraws, transfers, is promoted, or otherwise leaves the School, the Certificate of Immunization or a record generated from the computer database must be returned to the parent/guardian or transferred to the student's new school.

If the School is unable to ascertain whether a student has received the immunizations required on the first day of school for each school year, the School will inform the parent/guardian of the specific immunization requirements and advise that they go to the student's usual source of care or the nearest public health clinic to obtain the required immunizations. **The student may then be admitted only under one of the following conditions:**

- The parent/guardian provides a complete Certificate of Immunization or record of immunization to the School.
- The parent/guardian provides **all** of the following in order for the School to allow the provisional admittance of their student:
 - Proof of vaccination for all single dose vaccines.
 - For multiple dose vaccine series, the student has at least one dose of each multiple dose vaccine series required, and one of the following occurs:
 - The student receives the final dose of each multiple dose vaccine series required within 5 school days of the student's first day of attendance, and the student's parent/guardian provides a Certificate of Immunization on or before the 5th day of attendance.
 - If the student needs additional doses of a multiple dose vaccine series to meet the requirements, the student receives the next scheduled dose during the first 5 school days of the student's attendance, and the student's parent/guardian provides a Medical Certificate (see below) on or before the 5th school day scheduling the additional required doses.
 - If the student needs additional doses of a multiple dose vaccine series to meet the requirements but the next dose is not medically appropriate during the first 5 school days of the student's attendance, the student's parent or guardian provides a Medical Certificate (see below) on or before the 5th school day scheduling those additional doses.
 - **NOTE:** As used here, a "Medical Certificate" means only the official Department of Health form setting out the immunization plan for a student who is not fully immunized, filled out and signed by a physician, certified registered nurse practitioner, physician assistant, or public health official.
 - The School will review Medical Certificates at least every 30 days. Subsequent immunizations will be entered on the Certificate of Immunization or entered in the

School's computer database. Immunization requirements must be completed in accordance with the requirements of the Medical Certificate. If, upon review, the requirements of the Medical Certificate are not met, the School may exclude the student from attendance. The School will maintain all Medical Certificates until all of a student's required immunizations are administered and the immunization record is complete.

- The student has not been immunized or is unable to provide immunization records due to being homeless, in compliance with Federal laws including the McKinney-Vento Homeless Education Assistance Improvements Act.
- The student is transferring directly from another Pennsylvania school and is unable to provide immunization records immediately upon enrollment into the School. The parent/guardian will have 30 days to meet one of the other conditions of this section. If no condition has been satisfied after 30 days, the School may exclude the student from attendance.
- The student has not been immunized or is unable to provide immunization records on the first day of attendance for the school year due to being in foster care, in compliance with Federal laws including the Fostering Connections to Success and Increasing Adoptions Act. The parent/guardian will have 30 days to meet one of the other conditions of this section. If no condition has been satisfied after 30 days, the School may exclude the student from attendance.
- The Secretary of Health has issued a temporary waiver of the immunization requirements in one of the following circumstances:
 - The Centers for Disease Control and Prevention, United States Department of Health and Human Services has recognized a Nationwide shortage of supply for a particular vaccine.
 - A disaster has impacted the ability of students transferring into a school to provide immunization records.
- A physician or physician's designee provides a written statement that immunization may be detrimental to the health of the student. When the physician determines that immunization is no longer detrimental to the health of the student, the student must be immunized.
- The parent/guardian objects in writing to the immunization on religious grounds or on the basis of a strong moral or ethical conviction similar to a religious belief.

REQUIRED IMMUNIZATIONS

The following immunizations are required. All doses must be properly spaced and administered at the correct ages in order to be valid.

- Required vaccinations for original entry to school beginning in the 2017-18 school year:
 - Diphtheria, Tetanus, Acellular Pertussis (DTaP) (4 doses)
 - Polio (IPV) (4 doses)
 - Measles, Mumps, Rubella (MMR) (2 doses or evidence of immunity by lab test)
 - Hepatitis B (HepB) (3 doses, or FDA-approved 2 dose regimen, or evidence of immunity by lab test)
 - Varicella (Chickenpox) (2 doses, or evidence of immunity by lab test, or written statement of disease history from a parent, guardian, physician, certified nurse practitioner, or physician's assistant)
- Required for admission to grades 7 and above beginning in the 2017-18 school year:

- Diphtheria, Tetanus, Acellular Pertussis (DTaP) (1 additional dose)
- Meningococcal (MCV) (1 dose)
- Required for admission to grade 12 beginning in the 2017-18 school year:
 - Meningococcal (MCV) (1 dose given at age 16 or older)

A student who does not have an exemption and who does not receive the immunizations as required here may be excluded in that school year and each succeeding school year that the student fails to obtain the required immunization.

CARE AND TREATMENT OF STUDENTS

REPORTING OF POTENTIAL STUDENT MEDICAL CONDITIONS

All teachers must report to the School any unusual behavior, changes in physical appearance, changes in attendance habits, or changes in scholastic achievement which may indicate impairment of a student's health.

Likewise, the School will inform teachers of the health conditions of students which may affect behavior, appearance, or scholastic performance.

RESPONSE TO POTENTIAL STUDENT MEDICAL CONDITIONS

The appropriate designee of the School may, upon referral by a teacher or on their own initiative, advise a student's parent/guardian of the apparent need for a special medical or dental examination. The School will notify the parents/guardians of all students who appear to deviate from their normal growth and development pattern. The School will ask the parent/guardian to have the student examined by their family physician or dentist and provide the results of the examination to the School. If a parent/guardian fails to report the results to the School within a reasonable length of time, the School will arrange a special medical examination for the student.

If the medical record of any student at any time discloses a condition which requires medical, dental, or surgical treatment and the parent/guardian states to the School that s/he is financially unable to have such care provided, the School will recommend that the family apply for Medical Assistance.

ALLERGY MANAGEMENT

Parents/guardians have the responsibility to notify the School immediately of all student allergies and include all information requested under School procedures.

PARENT RESPONSIBILITIES

- If a student has any allergy (other than mild seasonal allergies), including any food allergy, parents/guardians are required to notify the School immediately and provide all pertinent information, including the following:
 - Type of allergy
 - Medical history regarding the allergy
 - Description of reaction
 - Doctor-recommended responses if there is exposure
- Comply with the School's medication policies for any medication required to treat the allergy.
- Provide (and update when necessary) all emergency contact information.

STUDENT RESPONSIBILITIES

- Do not trade food with others.
- Do not eat anything with unknown ingredients or known to contain any allergen.

- Be proactive in the care and management of their allergies and reactions.
- Notify an adult immediately if they eat something they believe may contain any food to which they are allergic or come into contact with any other allergen which may cause a reaction.

SCHOOL RESPONSIBILITIES

Upon notification, the School will be responsible for the following:

- Contacting the parent to review all provided information as well as gathering any additional information needed.
- At parent's request (and with written consent), contact the medical professional directly to gather needed information/advice regarding the specific student's needs.
- Meet with the parent, student, and any other necessary school staff, in a team meeting and create a medical plan for the student. This plan will outline the School's response should the child be exposed to the allergen.

ALLERGY PLAN

The plan will contain:

- Student's needs
- Parent's requests
- Doctor's recommendations
- A detailed plan of how the School will respond in the event the student is exposed to the allergen
- A list of the names of the individuals who will be responsible for implementing the plan

The plan will be distributed to all teachers and staff who work directly with the student. In addition, the nurse will meet with the staff to review the plan. The school nurse will meet with the student and work individually with the student to educate them regarding the allergy.

GENERAL MEDICATION ADMINISTRATION POLICY

Ideally, the administration of medication should take place at home. However, students may require medication administration during school hours in order to function optimally in the classroom in certain circumstances. The provisions of this section apply to all medication administered to students at or on behalf of the School, including over-the-counter (OTC), emergency, and prescription medications. **All medication must be administered only under a physician's authority.** Furthermore, medication may only be administered to a student under the written consent of a parent/guardian, except during a life-threatening emergency. Written authorizations from parents must be renewed at the start of each school year and contain the student's name; the parent/guardian's name, signature, and emergency phone number; approval to have the School administer medications; and a list of all medications approved.

Any medication given to a student during school hours must be documented in the student's school health record. Whether records are manually or electronically maintained, the record should include the student's name; date and time medication was given; name of medication; dose of medication; route and site of administration; and signature of person administering/observing medication being taken. In the case of PRN medications, results should also be charted to document whether appropriate results are being obtained.

The School will comply with section 504 of the Rehabilitation Act of 1973 (Public Law 93-112, 29 U.S.C. § 794) and 22 PA Code Chapter 711 in its medication administration practices.

NON-PRESCRIBED MEDICATION ADMINISTRATION POLICY

Standing orders (medical directives written and signed annually by the School's contracted physician) may authorize administration of specific OTC and/or emergency medications to students according to a defined

protocol. School administrators have the authority to agree to standing orders, but are advised to consult with appropriate professionals and consider the risks and benefits of the standing orders. The health office in each school building must have a copy of the signed standing orders on file. The School may develop a standard parent consent form for OTC medication administration. The form will notify parents of their right to opt out of allowing the School to administer emergency epinephrine treatment for their child.

PRESCRIPTION MEDICATION ADMINISTRATION POLICY

The School will administer prescription medication under the following procedure:

- The student's legal guardian, in conjunction with the student's Physician, must fully complete a School District of Philadelphia MED-1 form (or other form designated by the School) and return it to the School.
- Upon receipt of the properly completed MED-1 form the School will review and approve the document.
- The student's parent/guardian will supply the medication. The medication must be properly labeled and packaged by a Registered Pharmacist.
- All medications MUST be personally delivered by the parent/guardian to designated School personnel. The School will not accept medication from anyone but the parent/guardian.
- The medication will be kept in a locked and secure place at all times, unless the student is approved to carry and self-administer the medication (see below).
- The medication will be administered to the student per the Physician's instructions, and a written record of each administration will be made.
- When deemed necessary by the School or required by this Policy, a medication plan will be established. This plan will be shared with all relevant staff, as well as the student and parent.
- In certain cases, additional procedures must be followed, as described below.

STUDENT SELF ADMINISTERED MEDICATIONS

In certain circumstances, the School may at its discretion permit students to carry prescribed medications and devices and to self-administer such medications. Generally, this applies to diabetes treatment and emergency medications such as asthma inhalers or epinephrine auto-injectors (EpiPens). The School permits students to keep medication in their possession while attending school under the following conditions:

- The student/family meet the requirements of the School's prescription medication policy
- A physician certifies annually that both:
 - It is necessary for the student to keep the medication in his/her possession to ensure the student's safety
 - The student is qualified and able to self-administer the medication
- A parent/guardian acknowledges that by carrying his/her own medication, the student, not the School, becomes responsible for ensuring that the medication is taken and for the benefits or consequences of the medication
- The student demonstrates responsible behavior regarding the medication
- The student keeps the medication in his/her own possession at all times and does not allow it to be handled by or administered to another student
- The student agrees to notify appropriate School personnel each time he/she self-administers an emergency medication
- All parties agree to a personalized medication plan

The School has the right to revoke or restrict a student's privileges to possess and self-administer medication due to noncompliance with the school rules or provisions of a student's Service Agreement, IEP, or due to demonstrated unwillingness or inability to safeguard the medication and monitoring equipment from access by other students. If the confiscation or restriction of medication or equipment occurs, the prescribed medication or equipment will be appropriately stored in the school health office or in close proximity to the student. The student's classroom teachers and other identified school employees will be properly notified of the storage location of the prescription medication or equipment.

SCHOOL SUPPLY AND ADMINISTRATION OF EPINEPHRINE AUTO-INJECTORS

The School may maintain a supply of epinephrine auto-injectors in a safe, secure location and if so will designate one or more individuals to be responsible for the storage and use of the epinephrine auto-injectors. The responsible individuals will complete a Department of Health training program.

An epinephrine auto-injector from the School's supply that meets the prescription on file for Freire may be provided to and utilized by a student authorized to self-administer or may be administered by a trained school employee to respond to anaphylactic reaction under a standing protocol from a qualified health care practitioner. In the event a student is believed to be having an anaphylactic reaction, the School will contact 911 as soon as possible. The provisions of 42 Pa.C.S. § 8332 (relating to emergency response provider and bystander good Samaritan civil immunity) and § 8337.1 (relating to civil immunity of school officers or employees relating to emergency care, first aid and rescue) shall apply to a person who administers an epinephrine auto-injector in any of the situations outlined above.

PARENT/GUARDIAN OPT-OUT REQUEST

The Pennsylvania Public School Code, Section 1414.2(g) allows parents/guardians to request an exemption to the administration of an epinephrine auto-injector for their student. In order to request this exemption, parents/guardians must contact the School to make an appointment to discuss this decision, review and sign the opt-out form.

DIABETES CARE AND MANAGEMENT

A parent/guardian who desires that their student receive diabetes-related care and treatment while attending school must provide the School with written authorization for the care and instructions from the student's health care practitioner. This information will be used to create a diabetes management plan. The diabetes plan must be consistent with a student's Section 504 Service Agreement. The plan may include a requirement that the student's school bus driver be provided with an emergency response plan for the student.

NON-PRACTITIONER EMPLOYEES

The School may identify one or more employees to voluntarily provide diabetes care to a student. Such employees will annually complete the educational modules offered by the Department of Health or comparable education offered by a qualified health care practitioner. Upon completion of the required training, such School employees may be designated in a student's Section 504 Service Agreement or IEP to administer diabetes medications, use monitoring equipment, and provide other diabetes care. However, school employees who are not licensed health care practitioners may not administer diabetes medications without written authorization from both the student's health care practitioner and parent/guardian.

NALOXONE

Naloxone (Narcan) is a medication that can reverse an overdose that is caused by an opioid drug. In accordance with The Controlled Substance, Drug, Device and Cosmetic Act of 1972 (Act 139), the School may elect to maintain and administer Naloxone to individuals experiencing an opioid overdose. Should the School elect to maintain a supply of Naloxone, an administration protocol will be developed and reviewed annually, and individuals responsible for administering Naloxone will complete an appropriate training program. The Good Samaritan Provision of Act 139 provides civil immunity from prosecution for those responding to and reporting overdoses.

FIELD TRIPS, BEFORE AND AFTER SCHOOL, AND SUMMER PROGRAMS AND ACTIVITIES

Section 504 of the Rehabilitation Act of 1973 has been interpreted to require that students with disabilities have access to non-academic services such as field trips and cannot be denied access to school programs and activities on the basis of that disability. 34 CFR Part 104.34 (relating to nondiscrimination on the basis of handicap in programs or activities in an education setting) shall apply to any student to which the policy applies. Therefore, when participating in school-sponsored programs and activities, all students are entitled to the same health services they need during the regular school day.

The School may not request that a parent/guardian sign a waiver of liability as a condition to administer medication during these events. In the case of a school trip, the School may ask a parent to accompany his or her child but cannot require the parent to do so. Administration of medications is a support service that must be provided.

PARENTAL DESIGNEE

When a parent/guardian is unable to accompany his or her student, the parent may designate a responsible adult to accompany the student. The parent may not delegate responsibility for administering treatments or medications to any school staff member, school-designated trip chaperone, or student. The parent must provide the supplies and training if the parent delegates treatments or medication administration to a responsible adult. The School may not be involved in the delegation process.

CARDIOPULMONARY RESUSCITATION (CPR)

The School will have at each building, except in extenuating circumstances, one person certified in the use of cardiopulmonary resuscitation (CPR) during regular school hours when school is in session and students are present.

CIVIL LIABILITY

Pursuant to the provisions of 42 Pa. C.S. § 8332 (relating to emergency response provider and bystander good Samaritan civil immunity) and § 8337.1 (relating to civil immunity of school officers or employees relating to emergency care, first aid and rescue), any School employee who in good faith renders emergency care, treatment, first aid, or rescue at the scene of an emergency or who moves a student receiving said care or rescue to a hospital or other medical care facility shall be immune from civil liability as a result of rendering said care, except in any acts or omissions intentionally designed to harm or any grossly negligent acts which result in harm to the student receiving said care.

CONCUSSION PROTOCOL

If a student-athlete receives a bump, blow or jolt to the head, he/she will be removed from play immediately. If the student-athlete is determined by a game official, school staff member or present healthcare professional to exhibit signs or symptoms of a concussion, the student-athlete will not be allowed to return to participation that day.

The School staff member will notify the parent/guardian or relevant emergency contact in PowerSchool (school database) and also notify the School. The School will follow up with the student-athlete and notify a school administrator of the student-athlete's condition.

If the student-athlete was not allowed to return to play the day of the bump, blow or jolt to the head, the student-athlete cannot return to participation/play at all until he/she has been evaluated and cleared by an outside healthcare professional and presents signed documentation stating such.

CERTIFYING COACHES

Prior to the beginning of the season, all coaches are required to complete appropriate training as designated by the Department of Health.

STUDENT HEALTH RECORDS

MAINTENANCE POLICY

The School will maintain a comprehensive health record for each enrolled student, containing all the information the School obtains concerning the health of the child and kept in the school building where the student attends school. The contents of the record will include but are not limited to the results of the examinations, screenings, immunizations required, and questionnaires directed by the Secretary of Health.

All student health records are confidential, and their contents will be divulged only when necessary for the health of the child, at the request of the parent/guardian to a physician legally qualified to practice medicine, or to the student's new school if the student transfers.

When new students enroll at Freire Charter School who previously attended any other Pennsylvania school, the School will request the health records of those students from their previous schools. When a student transfers from Freire Charter School to any other Pennsylvania school, the School will send a copy of the student's health record to the new school upon the request of the new school.

The School will not destroy any student's health record for at least two years after the student ceases to be enrolled, but may surrender a copy of the student's health record or portion thereof to a parent/guardian if the child does not enroll in another Pennsylvania school. The School will retain student health records for the greater of any period of time required by this policy, any other School policies, and applicable state or federal laws or regulations.

The School and individuals acting on behalf of the School will comply with applicable privacy and confidentiality laws at all times.

FERPA

Schools function primarily under the *Family Educational Rights and Privacy Act* (FERPA), which protects the privacy of students' education records. Students' immunization and other health records that are maintained by the School are considered education records subject to FERPA. Parents/guardians have a right under FERPA to inspect and review these health and medical records. See the School's FERPA Policy for more information.

HIPAA

Health care providers function under the *Health Insurance Portability and Accountability Act* (HIPAA), which also affects schools in that it allows the School and a student's physician to communicate with each other without written authorization of the parent/guardian if it is for treatment purposes of the student. State licensure statutes and professional standards of practice for nurses and physicians require nurses to question/clarify medical orders, when indicated, before carrying them out, regardless of the healthcare setting. They also require physicians to provide nurses with sufficient information for safe execution of the treatment plan.

REPORTING TO THE DEPARTMENT OF HEALTH

The School will file all reports related to school health required by regulations of the Department of Health or Department of Education. This includes but is not limited to reporting immunization data to the Department of Health by December 31 of each year using the system provided, with a copy sent to the Philadelphia Department of Public Health.