

HEALTH

The board of education believes that good health is vital to successful learning. In order to help district pupils achieve and maintain good health, the board directs the chief school administrator to develop pupil health services that employs professional personnel and interacts with both parents/guardians and community health agencies. The program shall include but not be limited to:

- A. Employment of a medical inspector to perform those duties required by law, and to advise the chief school administrator on all matters affecting the health of pupils;
- B. Employment of at least one certified school nurse to assist with physical examinations; conduct biennial scoliosis screening; conduct an audiometric screening; maintain pupil health records; observe and recommend to the principal the exclusion of pupils who show evidence of communicable disease or who have not submitted acceptable evidence of immunizations; instruct teachers on communicable diseases and other health concerns; train and supervise the emergency administration of epinephrine for school staff who have been designated as delegates; supervise other nursing tasks; provide appropriate response to Do Not Resuscitate (DNR) orders; maintain valid, current Cardiopulmonary Resuscitation (CPR) certification; review and summarize health and medical information for the Child Study Team; assist in the writing and updating annually the accommodation plan under Section 504 for any student who requires one;
- C. Provision of proper and adequate facilities, equipment and supplies for professional health personnel and other staff;
- D. Establishment of a system of pupil health records in compliance with state law;
- E. Implement the Core Curriculum Content Standards in physical education, health, family life, safety, and use of drugs, alcohol, tobacco and anabolic steroids; recommendations for appropriate equipment and supplies to teach such courses;
- F. Development of rules and procedures to foster good pupil health, and periodic dissemination of these rules and procedures to the staff;
- G. Development of a program to provide safe drinking water and otherwise to maintain the buildings, grounds, facilities and equipment of the district in sanitary condition in accordance with law;
- H. Development and enforcement of an eye protection program as required by statute and administrative code;
- I. A regular report to the board on progress and accomplishments in the field of pupil health;
- J. Health services to staff that support pupil health;
- K. Provision of emergency services for injury and sudden illness;
- L. Provision for required physical examinations including an examination to certify that a pupil returning to school after suffering a contagious/infectious condition or illness is no longer a threat to the health of others;

M. Development of all regulations and procedures necessary for evaluation of pupils suspected of being under the influence of drugs/alcohol, tobacco or anabolic steroids;

N. Encouragement of correction of defects through fully informing pupils and parents/guardians concerning the findings of health examinations for scoliosis.

O. Preparation for the potential disruption of a pandemic flu outbreak, such as avian flu, by filling out a school preparedness checklist available from www.pandemicflu.gov or NJSBA, with periodic reports to the school board on steps the district has already taken, as well as additional steps that need to be taken, to prepare for a flu pandemic.

Annual Nursing Plan

The Chief School Administrator (or his/her designee) in conjunction with the school physician and the certified school nurse shall develop an annual Nursing Services Plan that details the provision of nursing services based upon the needs of the students in this school district. The Nursing Services Plan shall be adopted annually at a regular meeting and submitted to the county superintendent of education for review and approval. The Nursing Services Plan shall include:

- A. A description of the basic nursing services provided all students;
- B. A summary of specific medical needs of individual students and the services required to address the needs;
- C. A description of how nursing services will be provided in an emergency;
- D. Detailed nursing assignments for the school building;
- E. The nursing services and additional medical services provided to nonpublic schools.

The operation of the pupil health program shall be in compliance with the rules and regulations of the state department of education, local board of health and the state department of health and senior services, and state department of human services. The board shall review and adopt the regulations developed to implement the district's health services.

Students with Diabetes

As used in this policy, an "individualized health care plan" means a document setting out the health services needed by the student at school, and an "individualized emergency health care plan" outlines a set of procedural guidelines that provide specific directions about what to do in a particular emergency situation. Both are to be developed by the school nurse, in consultation with the parent or guardian of a student with diabetes and other medical professionals who may be providing diabetes care to the student, and signed by the parent or guardian.

The board believes that diabetes is a serious chronic disease that impairs the body's ability to use food, and must be managed 24 hours a day in order to avoid the potentially life-threatening short-term consequences of blood sugar levels that are either too high or too low. In order to manage their disease, students with diabetes must have access to the means to balance food, medications, and physical activity level while at school and at school-related activities.

Accordingly, a parent or guardian of a student with diabetes shall inform the school nurse, who shall develop an individualized health care plan and an individualized emergency health care plan for the student. Further, the parent or guardian must annually provide to the board of education written authorization for the provision of diabetes care as outlined in the plans, including authorization for the emergency administration of glucagon.

Both plans shall be updated by the school nurse prior to the beginning of each school year and as necessary if there is a change in the student's health status. The plans may include elements specified in N.J.S.A. 18A:40-12.13 including, but not limited to:

- A. The symptoms of hypoglycemia for that particular student and the recommended treatment;
- B. The symptoms of hyperglycemia for that particular student and the recommended treatment;
- C. The frequency of blood glucose testing;
- D. Written orders from the student's physician or advanced practice nurse outlining the dosage and indications for insulin administration and the administration of glucagon, if needed;
- E. Times of meals and snacks and indications for additional snacks for exercise;
- F. Full participation in exercise and sports, and any contraindications to exercise, or accommodations that must be made for that particular student;
- G. Accommodations for school trips, after-school activities, class parties, and other school-related activities;
- H. Education of all school personnel who may come in contact with the student about diabetes, how to recognize and treat hypoglycemia, how to recognize hyperglycemia, and when to call for assistance;
- I. Medical and treatment issues that may affect the educational process of the student with diabetes; and
- J. How to maintain communications with the student, the student's parent or guardian and healthcare team, the school nurse, and the educational staff.

The school nurse assigned to a particular school shall coordinate the provision of diabetes care at that school and ensure that appropriate staff are trained in the care of these students, including staff working with school-sponsored programs outside of the regular school day. The school nurse shall also ensure that each school bus driver that transports a student with diabetes is provided notice of the student's condition, how to treat hypoglycemia, and emergency/parent contact information. A reference sheet identifying signs and symptoms of hypoglycemia shall be posted in plain view within school buildings.

The school nurse shall have the primary responsibility for the emergency administration of glucagon to a student with diabetes who is experiencing severe hypoglycemia. The school nurse shall designate, in consultation with the board of education, additional employees of the school district who volunteer to administer glucagon to a student with diabetes who is experiencing severe hypoglycemia. The designated employees shall only be authorized to administer glucagon, following training by the school nurse or other qualified health care professional, when a school nurse is not physically present at the scene.

Upon written request of the parent or guardian and as provided in the individualized health care plan, the student shall be allowed to attend to the management and care of his/her diabetes in the classroom, on school grounds or at any school-related activity, if evaluated and determined to be capable of doing so consistent with the plan. The student's management and care of his/her diabetes shall include the following:

- A. Performing blood glucose level checks;
- B. Administering insulin through the insulin delivery system the student uses;
- C. Treating hypoglycemia and hyperglycemia;
- D. Possessing on the student's person at any time the supplies or equipment necessary to monitor and care for the student's diabetes;
- E. Compliance with required procedures for medical waste disposal in accordance with district policies and

as set forth in the individual health care plan; and

F. Otherwise attending to the management and care of the student's diabetes.

Automated Electronic Defibrillator (AED)

Because the Board recognizes that medical emergencies may occur that justify the use of AEDs, the Board may acquire and maintain this equipment for use by qualified staff members. An applicable patient would exhibit all of the following signs as per AHA standards on AED use:

- A. Is unconscious
- B. Is not breathing
- C. Has no signs of circulation (as confirmed by a pulse check)

Only those staff members documented as having completed the required training are authorized to use an AED. The Superintendent may establish additional guidelines for use of the AED.

Any employee, student or other individual who inappropriately accesses and/or uses an AED will be subject to disciplinary action, up to and including expulsion from school and/or termination of employment. Civil and/or criminal liability may also be imposed on any student, employee or individual who inappropriately accesses and/or uses an AED. All usage will be reported to the Board of Education.

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Legal References:

<u>N.J.S.A.</u> 18A:16-6, -6.1	Indemnity of officers and employees against civil actions.
	<u>N.J.S.A.</u> 18A:35-4.6 <u>et seq.</u> Parents Right to Conscience Act of 1979
	<u>N.J.S.A.</u> 18A:40-1 Employment of medical inspectors, optometrists and nurses; salaries; terms; rules
	<u>N.J.S.A.</u> 18A:40-3 Lectures to teachers
	<u>N.J.S.A.</u> 18A:40-4.3 Scoliosis; periodic examination; notice to parents or guardian
<u>N.J.S.A.</u> 18A:40-5	Method of examination; notice to parent or guardian
	<u>N.J.S.A.</u> 18A:40-6 In general
<u>N.J.S.A.</u> 18A:40-7, -8, -10, -11	Exclusion of pupils who are ill.
	<u>N.J.S.A.</u> 18A:40-12.11 <u>et seq.</u> Students with diabetes
	<u>N.J.S.A.</u> 18A:40-23 <u>et seq.</u> Nursing Services for Nonpublic School Pupils
	<u>N.J.S.A.</u> 18A:40A-1 <u>et seq.</u> Substance Abuse
	<u>N.J.S.A.</u> 44:6-2 Maintenance by boards of education of

clinics for indigent children
N.J.S.A. 2A:62A-23 to 26 AED emergency
 medical services, 1999 statute
N.J.A.C. 6A:16-1.1 et seq. Programs
 to Support Student Development

See particularly:

5141

N.J.A.C. 6A:16-1.1, -1.3,
 -1.4, -2.1, -2.3, -2.4

N.J.A.C. 6A:26-12.1 et seq. Operation and
 Maintenance of School Facilities
See particularly:
N.J.A.C. 6A:26-12.3
N.J.A.C. 8:57-1.1 et seq. Reportable
 Communicable Diseases

See particularly:

N.J.A.C. 8:57-2
N.J.A.C. 8:61-1.1

Reporting of AIDS and HIV
 Attendance at school by pupils or adults
 Infected by Human Immunodeficiency Virus (HIV)

Plainfield Board of Education v. Cooperman, 105 NJ 587 (1987), guidelines for admission of children with AIDS, the right to call witnesses and attendant right to cross-examine must be provided automatically upon request of the parties

Possible

Cross References:

1410	Local units
1420	County and intermediate units
3510	Operation and maintenance of plant
3516	Safety
3542	Food service
4112.4	Employee health
	4131/4131.1 Staff development; in-service education/visitations/conferences
4151.2	Family illness/quarantine
4212.4	Employee health
4251.2	Family illness/quarantine
5111	Admission
5125	Pupil records
5131	Conduct/discipline
5131.6	Drugs, alcohol, tobacco (substance abuse)
5141.1	Accidents
5141.2	Illness
5141.3	Health examinations and immunizations
5141.4	Child abuse and neglect
5141.21	Administering medication
5142	Pupil safety
5200	Nonpublic school pupils
6142.4	Physical education and health
6142.12	Career education

Key Words:

Health, Pupil Health, Student Health