

Existing policy #5141.3 adopted 3/17/14, with required modification to comply with statutes.

Students

Health Assessments and Immunizations

The Board of Education recognizes the importance of periodic health assessments according to state health regulations.

To determine health status of students, facilitate the removal of disabilities to learning and find whether some special adaptation of the school program may be necessary, the Board of Education requires that students have health assessments.

The Board of Education adheres to those state laws and regulations that pertain to school immunizations and health assessments including oral health assessments. It is the policy of the Board of Education to insure that all enrolled students are adequately immunized against communicable diseases. The Board may deny continued attendance in school to any student who fails to obtain the health assessments required under C.G.S. 10-206, as may be periodically amended.

The Board of Education shall annually designate a representative to receive reports of health assessments and immunizations from health care providers.

Parents wishing their children exempted or excused from health assessments must request such exemption to the Superintendent of Schools in writing. This request must be signed by the parent/guardian.

Parents/guardians wanting their children excused from immunizations on religious grounds (prior to kindergarten entry and grade 7 entry) must request such exemption in writing to the Superintendent of Schools if such immunization is contrary to the religious beliefs of the child or of the parent/guardian of the child. The request must be officially acknowledged by a notary public or a judge, a clerk or deputy clerk of a court having a seal, a town clerk, a justice of the peace, a Connecticut licenses attorney or a school nurse.

It is the responsibility of the Principal to insure that each student enrolled has been adequately immunized and has fulfilled the required health assessments. The school nurse shall check and document immunizations and health assessments on all students enrolling in school and to report the status to the school principal. The school nurse shall also contact parents or guardians to make them aware if immunizations and/or health assessments are insufficient or not up-to-date. The school nurse will maintain in good order the immunization and health assessment records of each student enrolled.

No record of any student's medical assessment may be open to the public.

Students

Health Assessments and Immunizations (continued)

As required, the District will annually report to the Department of Public Health and to the local health director the asthma data, pertaining to the total number of students per school and for the district, obtained through the required asthma assessments, including student demographics. Such required asthma diagnosis shall occur at the time of mandated health assessment at the time of enrollment, in either grade six or seven, and in either grade ten or eleven. Such asthma diagnosis shall be reported whether or not it is recorded on the health assessment form, at the aforementioned intervals. The District, as required, will also participate in annual school surveys conducted by the Department of Public Health pertaining to asthma.

The Superintendent of Schools shall give written notice to the parent/guardian of each student who is found to have any defect of vision or disease of the eyes, with a brief statement describing such defect or disease and a recommendation that the student be examined by an appropriately licensed optometrist or ophthalmologist.

Note: P.A. 18-168 requires boards of education to request that students have an oral health assessment prior to public school enrollment, in grade 6 or 7, and in grade 9 or 10. The legislation establishes related requirements on providers authorized to perform the assessments, parental consent assessment forms, and records access. The specifics are detailed in the administrative regulation pertaining to this policy.

(cf. 5111 - Admission)
 (cf. 5141.31 - Physical Examinations for School Programs)
 (cf. 5125 - Student Records)
 (cf. 5125.11 - Health/Medical Records – HIPAA)
 (cf. 5141 - Student Health Services)

Legal Reference: Connecticut General Statutes

- 10-204a Required immunizations as amended by P.A. 15-174 and P.A. 15-242)
- 10-204c Immunity from liability
- 10-205 Appointment of school medical adviser
- 10-206 Health assessments (as amended by P.A. 17-146 and P.A. 18-168)
- 10-207 Duties of medical advisors
- 10-206a Free health assessments
- 10-208 Exemption from examination or treatment
- 10-208a Physical activity of student restricted; board to honor notice
- 10-209 Records not to be public. Provision of reports to schools.
- 10-212 School nurses and nurse practitioners

Students

Health Assessments and Immunizations (continued)

Legal Reference: Connecticut General Statutes (continued)

10-214 Vision, audiometric and postural screenings. When required. Notification of parents re defects; record of results. **(as amended by PA 17-146)**

Department of Public Health, Public Health Code, 10-204a-2a, 10-204a-3a, 10-204a-4

Section 4 of P.A. 14-231

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)

P.A. 17-146 “An Act Concerning the Department of Public Health’s Various Revisions to the Public Health Statutes,” Section 5, effective 10/1/17

PA 18-168 An Act Concerning the Department of Public Health’s Recommendations Regarding Various Revisions to the Public Health Statutes, Sections 7-9, 539 & 540

Policy adopted:

WOODBIDGE PUBLIC SCHOOLS
Woodbridge, Connecticut

Existing regulation with required modifications.

Students

Health Assessments and Immunizations

In accordance with Connecticut General Statutes 10-206, as amended, 10-204a, and 10-214, the following health assessment procedures are established for students in the district:

- 1) Proof of immunization shall be required prior to school entry. A "school-aged child" also includes any student enrolled in an adult education program that leads to a high school diploma. This immunization verification is mandatory for all new school enterers and must include complete documentation of those immunizations requiring a full series. A required immunization record includes:
 - a) **For initial entry into school for kindergarten, regular and special education pre-school programs, grades 1-6:**
 - 4 doses of DTP/DTaP vaccine (Diphtheria - Pertussis - Tetanus). At least one dose is required to be administered on or after the 4th birthday for children enrolled in school at kindergarten or above. Students who start the series at age 7 or older need a total of 3 doses.
 - 3 doses of either trivalent oral polio vaccine (TOPV) or inactivated polio vaccine (IPV) with at least one dose of polio vaccine administered on or after the 4th birthday and before school entry. (This then usually results in 4 doses in total.)
 - 2 doses of MMR vaccine (measles, mumps and rubella). One dose at one (1) year of age or after and a second dose, given at least twenty-eight (28) days after the first dose, prior to school entry in kindergarten through grade twelve (12) OR disease protection, confirmed in writing, by a physician, physician assistant or advanced practical registered nurse that the child has had a confirmed case of such disease based on specific blood testing conducted by a certified laboratory. One dose on or after the child's first birthday for enrollment in preschool.
 - 3 doses of Hepatitis B vaccine (HBV) or has had protection confirmed in writing by a physician, physician assistant or advanced practice registered nurse based on specific blood testing by a certified laboratory.
 - 1 dose of Hib (Hemophilus Influenza type b) given on or after the first birthday, is required of all school children who enter school **prior to their fifth birthday** or had a laboratory confirmed infection at age 24 months or older, confirmed in writing by a physician, physician assistant or advanced practice registered nurse. Children five and older do not need proof of Hib vaccination.

Students

Health Assessments and Immunizations (continued)

a) For initial entry into school for kindergarten, regular and special education pre-school programs, grades 1-6: (continued)

- Varicella (Chickenpox) Immunity –
 - (i) 1 dose on or after the 1st birthday or must show proof of immunity to varicella (chickenpox) for entry into licensed pre-school programs and kindergarten; or on or after August 1, 2011 for entry into kindergarten two (2) doses shall be required, given at least three (3) months apart, the first dose on or after the 1st birthday.

(ii) Proof of immunity includes any of the following:

- * Documentation of age appropriate immunizations considered to be one dose administered on or after the student's first birthday (if the student is less than 13 years old) or two doses administered at least 30 days apart for students whose initial vaccination is at thirteen years of age or older.

Note: The National Advisory Committees on Immunization Practices (ACIP) changed the recommendation for routine vaccination against chicken pox (Varicella) from a single dose for all children beginning at 12 months of age to two doses, with the second dose given just prior to school entry. The ACIP also recommends that all school-aged children, up to 18 years of age, who have only had a single dose of Varicella vaccine to be vaccinated with a second dose.

- * Serologic evidence of past infection, confirmed in writing by a physician, physician assistant or advanced practice registered nurse based on specific blood testing by a certified laboratory, or
- * Statement signed and dated by a physician, physician assistant or advanced practice registered nurse indicating a child has already had varicella (chickenpox) based on diagnosis of varicella or verification of history of varicella. (Date of chickenpox illness not required)

(iii) All students are required to show proof of immunity (see above) to Varicella for entry into 7th grade.

Note: The Connecticut Department of Public Health has indicated that a school-aged child, 13 years of age or older, will only be considered fully immunized if he/she has had two doses of the Varicella vaccine, given at least 4 weeks apart.

Students

Health Assessments and Immunizations (continued)

a) For initial entry into school for kindergarten, regular and special education pre-school programs, grades 1-6: (continued)

- Hepatitis A – Requirement for PK and K for children born on or after January 1, 2007 or enrolled in preschool or kindergarten on or after August 1, 2011.
 - (i) Two (2) doses of hepatitis A vaccine given at least six (6) months apart, the first dose given on or after the child's first birthday; or
 - (ii) Has had protection against hepatitis A confirmed in writing by a physician, physician assistant or advanced practice registered nurse based on specific blood testing by a certified laboratory.
- Influenza Requirement for PK.
 - (i) Effective January 1, 2012 and each January 1 thereafter, children aged 24-59 months enrolled in preschool are required to receive at least one (1) dose of influenza vaccine between August 1 and December 31 of the preceding year (effective August 1, 2011).
 - (ii) Children aged 24-59 months who have not received vaccination against influenza previously must be given a second dose at least twenty-eight (28) days after the first dose.
- Pneumococcal Disease Requirement for PK and K
 - (i) Effective August 1, 2011 all students born on or after January 1, 2007, enrolled in PK and K who are less than five (5) years of age must show proof of having received one (1) dose of pneumococcal conjugate vaccine on or after the student's first birthday.
 - (ii) An individual shall be considered adequately protected if currently aged five (5) years or older.

Health assessment and health screening requirements are waived if the parent legal guardian of the student or the student (if he or she is an emancipated minor or is eighteen years of age or older) notifies the school personnel in writing that the parent, guardian or student objects on religious grounds. (CGS 10-204a)

Students failing to meet the above requirements shall not be allowed to attend school.

Students

Health Assessments and Immunizations (continued)

A physical examination including blood pressure, height, weight, hematocrit or hemoglobin, and a chronic disease assessment which shall include, but not be limited to, asthma and which must include public health related screening questions for parents to answer and other screening questions for providers and screenings for hearing, vision, speech, gross dental and posture shall be required for all new school enterers.

A test for tuberculosis, as indicated above, is not mandatory, but should be performed if any of the following risk factors prevail:

1. birth in a high risk country of the world (to include all countries in Africa, Asia, the former Soviet Union, Eastern Europe, Central and South America, Dominican Republic and Haiti); and do not have a record of TST (tuberculin skin test) or IGRA (interferon-gamma release assay) performed in the United States.
2. travel to a high risk country staying at least one week with substantial contact with the indigenous population since the previously required examination;
3. extensive contact with persons who have recently come to the United States since the previously required examination;
4. contact with persons suspected to have tuberculosis; or
5. lives with anyone who has been in a homeless shelter, jail or prison, uses illegal drugs or has HIV infection.

Health assessments completed within one calendar year of new school entry will be accepted by the school system. Failure of students to satisfy the above mentioned health assessment timeliness and/or requirements shall result in exclusion from school.

(*Note: As an alternative health assessment could be held in grade 7.)

The District shall annually report to the Department of Public Health, and to the local health director, the asthma data pertaining to the total number of students per school and in the district obtained through school assessments, including student demographics. Such asthma diagnosis shall be reported whether or not it is recorded on the health assessment form, at the aforementioned intervals.

- 3) Parents or guardians of students being excluded from school due to failure to meet health assessment requirements shall be given a thirty calendar day notice in writing, prior to any effective date of school exclusion. Failure to complete required health assessment components within this thirty day grace period shall result in school exclusion. This exclusion shall be verified, in writing, by the Superintendent of Schools or his/her designee.

Students

Health Assessments and Immunizations (continued)

Parents of excluded students may request administrative hearing of a health assessment-related exclusion within five days of final exclusion notice. An administrative hearing shall be conducted and a decision rendered within five days of final exclusion notice. An administrative hearing shall be conducted and a decision rendered within fifteen calendar days after receipt of request. A subcommittee of the Board of Education shall conduct an administrative hearing and will consider written and/or oral testimony offered by parents and/or school officials.

- 4) Health screenings shall be required for all students according to the following schedule:

Vision Screening	Grades K-6,9 K, 1, 3, 4, 5
Audiometric Screening	Grades K-3,5,8 K, 1, 3, 4, 5
Postural Screening	Grades 5,6, 5 and 7 for female students Grades 8 or 9 for male students

The school system shall provide these screening to students at no cost to parents. Parents wishing to have these screenings to be conducted by their private physician shall be required to report screening results to the school nurse.

(Health assessments may be conducted by a licensed physician, advanced practice registered nurse, registered nurse, physician assistant or by the School Medical Advisor.)

- 5) Parents of students failing to meet standards of screening or deemed in need of further testing shall be notified by the School Nurse.

Students eligible for free health assessments shall have them provided by the School Medical Advisor and/or designee. Parents of these students choosing to have a health assessment conducted by medical personnel outside of the school system shall do so at no cost to the school system.

- 6) Health records shall be maintained in accordance with Policy #5125.

Oral Health Assessments

Parents are encouraged to have oral health assessments for their child(ren) prior to public school enrollment in grade 6 or 7, and in grade 9 or 10. Such assessment may be conducted by a dentist, dental hygienist, physician, physician assistant (PA), or an advanced practice registered nurse (APRN), if he or she is trained in conducting such assessments as part of a DPH-approved training program. When conducted by a dentist the oral assessment must include a dental examination. If another such provider conducts the assessment, it must include a visual screening and risk assessment.

Students

Health Assessments and Immunizations (continued)

Oral Health Assessments (continued)

Parent/guardian consent is required prior to the oral health assessment. The assessment is to be made in the presence of the parent/guardian or another school employee. The parent/guardian must receive prior written notice and have a reasonable opportunity to opt his/her child out of the assessment, be present at the assessment or provide for the assessment himself or herself.

A child's public school enrollment continued attendance shall not be denied for his/her failure to receive the oral health assessment.

The district may host a free oral health assessment event at which a qualified provider performs such oral health assessments. Parents/guardians will be given prior notice of such a free screening event providing the parents/guardians the opportunity to opt their children out of the assessment event. If the parent/guardian does not do so, the child must receive an assessment free of charge. The child is prohibited by the legislation from receiving any dental treatment as part of the assessment event without the parent's/guardian's informed consent.

The results of an oral health assessment shall be recorded on forms supplied by the State Board of Education. The provider performing the assessment must completely fill out and sign the form. Recommendations by the provider shall be in writing. For any child who receives an oral health assessment, the results must be included in the child's cumulative health record.

Appropriate school health personnel shall review the assessment results. If it is determined that a child needs further testing or treatment, the Superintendent shall give written notice to the child's parent/guardian and make reasonable efforts to ensure that further testing or treatment is provided. Such efforts include determining whether the parent/guardian obtained the necessary testing or treatment for the child and, if not, advising the parent or guardian on how to do so. The results of the further testing or treatment must be recorded on the assessment forms and reviewed by school health personnel.

As with other school health assessments, no records of oral health assessments may be open to public inspection; and each provider who conducts an assessment for a child seeking to enroll in a public school must provide the assessment results to the school district's designated representative of the child.

Legal Reference: Connecticut General Statutes
10-204a Required immunizations
10-204c Immunity from liability
10-205 Appointment of school medical adviser
10-206 Health assessments (as amended by June Special Session PA 01-4,
PA 01-9, PA 05-272 and PA 07-58)

Students

Health Assessments and Immunizations (continued)

Legal Reference: Connecticut General Statutes (continued)

10-207 Duties of medical advisers

10-206a Free health assessments (as amended by June Special Session PA 01-1)

10-208 Exemption from examination or treatment

10-208a Physical activity of student restricted; board to honor notice

10-209 Records not to be public. Provision of reports to schools.

10-212 School nurses and nurse practitioners

10-214 Vision, audiometric and postural screenings. When required. Notification of parents re defects; record of results, as amended by PA 17-173.

Department of Public Health, Public Health Code, 10-204a-2a, 10-204a-3a and 10-204a-4

Regulation approved:

WOODBRIIDGE PUBLIC SCHOOLS
Woodbridge, Connecticut