



**HEALTH SERVICES-
IMPLEMENTATION**

I. General.

- (1) Health Examinations. It is recommended that students entering school for the first time have a complete physical and dental examination. Teachers with concerns regarding student health issues should refer students and parents to the school nurse.
- (2) Services Provided by the Education Service to District Students. The district may, through resolution services and/or contractual agreements with Multnomah Education Service District and/or other public health agencies, provide health services to students.

II. Responsibilities for Health Services

- (1) Routine health exams and screenings are conducted in schools.
 - (a) Students in pre-K, kindergarten, and grades one, three, five and seven routinely receive Snellen vision screening. Parents will be advised of screening results and referral recommendations. Students in other grades are referred as needed.
 - (b) Students in pre-K, kindergarten, and grades ~~one, three, and five~~ routinely receive audiometric examinations as a hearing screening. Parents will be advised of screening results and referral recommendations. Students in other grades are referred as needed.
 - (c) A daily fluoride tablet program is offered upon request at no cost to schools or families.
- (2) District employees, public health agencies, and educational school districts work together to identify health issues and provide resources to assist students with health concerns. The responsibilities are as follows:

	Teacher	School Administration	Multnomah County School Community Dental Health	MESD Nurse
Dental	Identify students having deviations from normal, reporting to parents and/or the principal; encourage students to have good oral health practices	Provide guidance to staff regarding procedures; take other action when appropriate	Offer preventative dental health services to schools such as daily fluoride tablets and dental sealant program	Encourage students to have good oral health practices
	Teacher	School Administration	MESD Nurse	MESD Audiometrists
Hearing	Identify students with poor or defective articulation, ear complaints to school speech clinician and school nurse	Provide guidance to staff regarding procedures; take other action when appropriate	Follow up with parents as appropriate	Conduct hearing screenings

	Teacher	School Administration	MESD Nurse
Vision	Identify students with vision concerns to school nurse	Provide guidance to staff regarding procedures; take other action when appropriate	Conduct Snellen vision screenings; follow up with parents as appropriate
Mental	Identify students with unusual learning or socio-emotional difficulties related to behavior problems; refer to principal, counselor, school nurse, school-based clinic or other	Provide guidance to staff regarding procedures; make further referrals as appropriate	Provide risk assessment and follow-up with parents/guardians as indicated and offer referral resources when appropriate.

	support personnel		
Communicable Diseases	Refer students suspected of having communicable disease to school nurse or to principal in absence of school nurse	Follow policies and procedures outlined in manual Communicable Diseases in a School Setting, Section I. Guidelines for Exclusion; send suspected child home with Notice of Exclusion Form for parents; readmit student when symptom-free or permission of physician, school or public health nurse following manual Section II Recommendations for School Attendance/Restriction/Reporting	Follow policies and procedures outlined in manual Communicable Diseases in a School Setting, Section I. Guidelines for Exclusion

III. Head Lice

The district desires to maximize students' academic performance and physical well-being in a healthy and safe environment. Head lice is not categorized as a communicable disease. The district recognizes that the responsibility for the treatment of head lice rests with the home, but that schools can play an important role in educating parents, students, and staff about the prevention, diagnosis, and treatment of head lice. The district operates on a no exclusion, evidence-based policy supported by the American Academy of Pediatrics, the Centers for Disease Control, the National Association of School Nurses, and the Harvard School of Public Health. Suggested school measures for head lice control, as provided in *Head Lice Guidance*¹¹ issued through the Oregon Department of Education and the Oregon Health Authority will be followed.

(1) Head lice checks will only be done on an individual, symptom-prompted basis, near the end of a class period, and privacy and confidentiality of the student will be enforced. The school nurse can be used as a resource to help identify the presence of lice or nits on an individual basis, as requested per teacher or that student's parent/guardian.

(a) If live lice or nits are discovered, an attempt will be made to contact the parent/guardian by telephone or email to report the incidence and answer questions. Parental notification will be provided with the student with live lice, containing directions about how to treat a student, and/or other preventative measures. The parent should contact their healthcare provider or local health department

in the event additional assistance and/or information is needed regarding the treatment of the student, other family members, close contacts, and the home environment.

(b) The student will receive education on avoiding head-to-head contact and the sharing of personal items such as hats and hoodies with peers, and will return to class; the presence of lice/nits will not be cause for an otherwise healthy student to be excluded from the instructional environment.

- (2) By educating staff, students, and parents with information on lice prevention and management, we aim to:
- a) sustain a collaborative attitude towards containment of pediculosis/nits.
 - b) discourage head to head contact between students.
 - c) discourage the sharing of personal items such as combs, brushes, and hats.
 - d) encourage regular head checks at home by parents as an effective way to detect and treat head lice.
 - e) encourage classroom management by teachers which minimizes any furniture or activities that promote head-to-head contact.

^[1]<https://www.oregon.gov/ode/students-and-family/healthsafety/Documents/headliceguidance.docx>

IV. **Medical Records**

- (1) The district will maintain an Oregon School Health Record Screening folder for each child on which all significant medical information should be recorded.
- (2) The Oregon School Health Screening Record folder shall be maintained as a part of the student's educational record and include, but not be limited to:
 - (a) Results of health screening (vision and hearing screening are mandatory);
 - (b) The immunization record (CIS form - mandatory);
 - (c) The TB Clearance Certificate (mandatory when required by law according to the student's birth country);
 - (d) Medication administration record (if administered by school staff as per Board Policy 4.50.026-P, Administering Non-injectable Medicines to Students, and Administrative Directive 4.50.027-AD, Procedures for Administering Non-injectable Medicines to Students).
- (3) Other health information should be in a file kept and maintained by the school nurse or an individual designated by the district to maintain health information confidentially. This health information includes:
 - (a) Records of nursing medication administration;
 - (b) Records of nursing assessment and nursing care given in the school setting;
 - (c) Medical records from outside health care providers and health care agencies;
 - (d) Reports of psychological diagnostic testing.
- (4) Confidential health information may be shared with district personnel who have a legitimate educational interest, and may be released to other districts or agencies

only with parental consent, consent of the student if he or she is over 18 years of age or legally emancipated, or by subpoena.

Policy Implemented: 4.50.020-P

History: Adpt. 6/71; Amd. 8/74; Amd. 11/79; Amd. 2/82; Amd. 4/82; Amd. 11/82; Amd. 12/85; Amd. 4/87; Section on "Child Abuse" Removed & Rnmd. 4.50.050 5/90; Amd. 9/29/92; Amd. 10/12/98; Amd. 9/01/02; Amd. 8/12/08 Amd. 7/10 Amd. 6/23