

Chapter 5

STUDENT HEALTH SERVICES

Medical and Health Information

It is the policy of School District 146 that the administration of medication to students during regular school hours and during school-related activities is the responsibility of the parent. The State of Illinois and School District 146 discourage the administration of medication during school hours unless it is absolutely necessary for the critical health and well-being of the student. All medication required for these reasons will be administered by the parent. If a parent is unable to administer medication during school hours, a "School Medication Authorization" form must be completed by the parent and the student's physician before the child can receive any medication in school. Medication must be in the original, labeled prescription bottle (or in the original packaging in the case of over the counter medications) appropriately labeled by the pharmacist, clearly marked with the child's name, prescription number, and description of medication and dose.

Over the counter medication also requires a signed consent form. If you need this form or have any questions, please contact the school nurse. **Pain and fever medications such as Tylenol and aspirin, as well as cough drops, are not school-supplied items.**

Illinois law (Public Act 97-0361) allows students to carry and self-administer both asthma inhaler medication and allergy epinephrine auto-injector medication at school. In order for students to self-administer an asthma inhaler, written authorization from the parent/ guardian and a copy of the prescription must be on file in the office of the school nurse. For self-administration of epinephrine auto-injector, written authorization from the parent/guardian and physician/ advanced practice registered nurse must be on file in the office of the school nurse. The written authorization must include the name of the student. Please contact the school nurse to discuss these special circumstances as they pertain to your child and self administration of these medications.

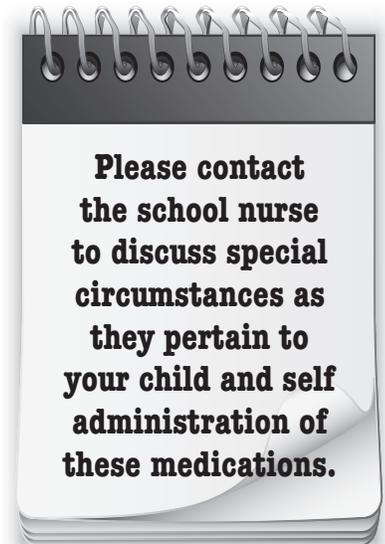
Community Consolidated School District 146 and its employees will not be responsible for injury or illness of any student resulting from ingestion of prescribed medication.

Asthma flare-ups account for the largest percentage of school absences nationally. Nearly 1 in 11 children are diagnosed with this chronic illness. Illinois Public Act 99-0843 requires school districts to request an Asthma Action Plan for all students with a diagnosis of asthma. Please provide the health office with this plan, completed by your family doctor. Be sure to provide the health office with all medication specified in the Asthma Action Plan

The increasing incidence of allergies and the potential for life-threatening reactions requires an increased awareness of students with allergies. Allergy Action Plans, completed by your family doctor, are recommended for all students with serious allergies. These plans generally include medications and treatments to provide in the event of an allergic reaction or anaphylaxis (life-threatening allergic reaction). Information on students with allergies is provided to staff on a need-to-know basis and is used to plan safe activities for students.

In the case of severe allergic reaction, each school is prepared to contact emergency services and provide emergency procedures to support our students. The District may maintain a supply of undesignated epinephrine according to state law and Board policy. A registered nurse or trained staff

ADMINISTRATION OF MEDICATION POLICY



ASTHMA NOTES

ALLERGY AWARENESS

member may administer the undesignated auto-injectable epinephrine to any person that the nurse or trained staff member believes is having an anaphylactic reaction.

FOOD ALLERGIES

District 146 recognizes the increasing prevalence of severe food allergies among students and staff. Every food-related allergic reaction has the possibility of developing into a life-threatening reaction and even with proper treatment, complications can occur. Anaphylaxis can occur within minutes or hours after exposure to the allergen. Some individuals may react to just touching the substance, while for others, consumption of a tiny amount of that food can cause a reaction. Please be sure to notify the school nurse if your child has a serious food allergy so the appropriate precaution can be taken and appropriate care plan will be in place in your child's classroom.

The following precautions will be taken in classrooms with children with known peanut/tree nut allergies:

- All known peanuts/tree nuts and their products will be eliminated from classroom curriculum. Food labels will be read and consideration given to the possible presence of allergenic substances that must be eliminated from teacher-directed classroom activities.
- Parents should not send peanuts/tree nuts and their products to the classroom for snack time, field trips, classroom celebrations or times when lunch is eaten in the classroom (peanut residue could pose a problem for a highly sensitive child).
- Children may continue to bring lunches with nut products (such as peanut butter and jelly sandwiches) to school.
- Allergy aware tables are available for allergic children who must abstain from peanuts and/or tree nuts. Friends who order school supplied hot lunch may join them at this table.

STUDENTS WITH DIABETES

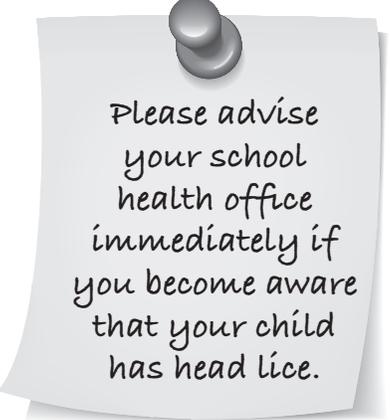
If your child has diabetes and requires assistance with managing this condition while at school and school functions, a Diabetes Medical Management Plan (DMMP), completed and signed by a physician licensed to practice medicine in all of its branches, or authorized advanced practice nurse (APN), or a physician assistant (PA) delegated to work with a supervising physician, must be submitted to the school health office

HEAD LICE

Head lice are a nuisance best avoided by common sense prevention measures, frequent inspection, and effective treatment when necessary. Head lice are often found in the hair around the ears and base of the neck, but may be present on other areas of the scalp. Children are often without symptoms, but may have an itchy scalp. If close contact results in the transferring of lice, eggs that are laid may hatch in 7-10 days. As long as live lice remain on an infested person's clothing, linens, combs or hair accessories, they can be transferred to another host. Transmission occurs by direct contact with an infested person, or by indirect contact with an object that has been contaminated with lice.

Although we cannot prevent the incidence of students who bring head lice to school, we can assist in the control of the spread. Reminding students not to share hats, combs, clothing or hair accessories are all preventive measures that can be implemented.

If your child is identified to have live head lice or nits (eggs), you will be called to take him/her home for treatment. All household members should be checked for the presence of lice.



Please advise your school health office immediately if you become aware that your child has head lice.

Instructions and guidance will be provided to assist you in lice/nit removal and steps to be taken at home. The District does not recommend specific products to treat head lice, and urges parents to contact their health care professionals for advice. Your child will be rechecked by health staff upon returning to school, and periodically as needed, and will be permitted to return to the classroom if no evidence of lice is found. When a case is identified, paper notices will be sent home with all students in the grade level.

Please advise your school health office immediately if you become aware that your child has head lice. Parents must be active, ongoing partners in managing and preventing head lice outbreaks by checking their own children for head lice regularly and treating children promptly if lice are found.

Physical Examination Requirement

In order to comply with state legislation for school enrollment, all children entering early childhood, kindergarten and sixth grade, and transfer students, must present proof of a current physical exam prior to admission. All components of the Illinois Certificate of Child Health Examination including the system review, diabetes screening, lead risk questionnaire, and health history, must be completed in order to be accepted by the school. Failure to comply with these requirements by the first day of the school year will result in a student's exclusion from school until the required health forms are presented to the District.

Immunization Schedule

All children without established contraindications must receive diphtheria-tetanus-pertussis (DTP), polio, measles-mumps-rubella (MMR) and Varicella (chickenpox) vaccines in accordance with recommended schedules.

In addition, Haemophilus influenza type b (HIB), pneumococcal (PCV), and Hepatitis B series are required prior to entry to Early Childhood.

For the 2017-2018 school year: two doses of Varicella vaccine are required for kindergarten and grades 1, 2, 3, 6, 7, and 8; one dose of Tdap and the Hepatitis B series is required for all students entering grades 6 through 8; one dose of Meningococcal conjugate vaccine is required for students entering grades 6 through 8.

Failure to comply with these requirements by the first day of school will result in the student's exclusion from school until the required proof of immunizations is presented to the District.

Dental Examination Requirement

According to Illinois law, all children in kindergarten, second, and sixth grades are required to have an oral health examination. The examination must be performed by a licensed dentist. The completed form with the dentist's signature must be returned to the school health office by May 15th of the school year.

Eye Examination Requirement

All children entering kindergarten and all students (grades 1-8) entering the Illinois school system for the first time are required to have a complete eye examination. Each child is to present proof of having been examined by a licensed ophthalmologist or optometrist. The completed form with eye doctor's signature must be returned to the health office by October 15 of the school year.

Physical, dental, and eye exams must have been administered within the previous 12 months.

SCHOOL HEALTH REQUIREMENTS

SCHOOL SCREENINGS **Hearing Screening**

The purpose of a hearing screening and threshold testing is to identify students with hearing losses that may affect their educational, emotional, social, speech and/or language development. Even mild losses may be educationally and medically significant. Hearing screening will be done for children in the following mandated groups: early learning, kindergarten, first, second and third grades, special education students, teacher referrals and students new to the District. Children determined to need further evaluation will be referred in a letter sent home to the parent.

Hearing screening is not a substitute for a complete hearing evaluation by a physician or audiologist. Your child is not required to undergo hearing screening if a physician or audiologist has completed and signed a report form indicating that a hearing evaluation has been administered within the previous 12 months.

Vision Screening

The purpose of a vision screening is to identify students with visual impairments. Visual problems can affect the educational, social, and emotional development of children. Early detection of vision problems is vital. Vision screenings will be done for children in the following mandated groups: early learning, second grade, eighth grade, special education students, teacher referrals and students new to the District. Kindergarten students without an eye examination will also be screened. Referrals will be sent home to parents of children who need further evaluation based on the outcome of the screening.

Vision screening is not a substitute for a complete eye and vision evaluation by an eye care professional. Your child is not required to undergo vision screening if an ophthalmologist or optometrist has completed and signed a report form indicating that a vision examination has been administered within the previous 12 months.

HOME HOSPITAL INSTRUCTION

If your child must spend extended time (more than two weeks but less than six months) at home or in a hospital because of a temporary health problem, you may request home or hospital instruction, with a doctor's prescription. Please contact your child's principal if you believe you may need this service. An evaluation will be conducted and if home or hospital instruction is found to be appropriate, arrangements will be made to teach your child at home or in the hospital.

ILLNESS AT SCHOOL

If a child becomes ill or is injured at school, the school will make all reasonable efforts to notify the parent(s) or the parent-designated emergency phone contact about removing the child from school. In the event your child requires emergency medical attention outside of the usual nature, the school nurse or authorized staff member will call 911 for an ambulance and transport to the nearest hospital emergency department. School personnel will then notify the parent(s) or guardian with the necessary information.

Please remember a child who is well should be in school, and one who is sick should be kept home. Children need to be healthy to learn. A child who has a fever over 100 degrees, vomiting, or diarrhea should be kept home and not return to school for 24 hours after symptoms subside and fever returns to normal (without the use of fever reducing medications). Also, a child who has a diagnosed communicable disease, undiagnosed rash or uncontrolled cough should be kept home.

Returning to school prematurely after illness may result in another absence because the child is vulnerable to recurrence of the illness, as well as cross infection with other students who may be in the beginning stages of an illness.

A student who sustains an illness or injury which requires an absence of more than three days must present a physician's statement in order to be readmitted to school.

Encouraging hand washing and covering coughs will help limit the spread of germs.

If a parent wishes to limit a child's physical education and/or recess activity, or have the child excused from these activities, the parent must submit a written request to the school. This should be given to the school nurse. In such cases the activity will be limited for no longer than three calendar days. If a child must not participate in physical education classes and/or recess for medical reasons for more than three days, a note from the physician must be provided, specifying the limitations

As part of the Concussion Bill that was signed into law, it is now a requirement for every school to have a signed concussion form on file for every student athlete competing at their school. Students who sustain a concussion injury and participate in interscholastic athletic activity are subject to return-to-play and return-to-learn protocols established by the school board.

Student wellness, including good nutrition and physical activity, shall be promoted in the District's educational program, school activities, and meal programs. This policy shall be interpreted consistently with Section 204 of the Child Nutrition and WIC Reauthorization Act of 2004.

Goals for Nutrition Education

The goals for addressing nutrition education include the following:

- Schools will support and promote good nutrition for students.
- Schools will foster the positive relationship between good nutrition, physical activity, and the capacity of students to develop and learn.
- Nutrition education will be part of the District's comprehensive health education curriculum.

Goals for Physical Activity

The goals for addressing physical activity include the following:

- Schools will support and promote an active lifestyle for students.
- Physical education will be taught in all grades and shall include a developmentally planned and sequential curriculum that fosters the development of movement skills, enhances health-related fitness, increases students' knowledge, offers direct opportunities to learn how to work cooperatively in a group setting, and encourages healthy habits and attitudes for a healthy lifestyle.
- During the school day, all students will be required to engage in a daily physical education course, unless otherwise exempted.
- The curriculum will be consistent with and incorporate relevant Illinois Learning Standards for Physical Development and Health as established by the Illinois State Board of Education.

Nutrition Guidelines for Foods Available in Schools During the School Day

Students will be offered and schools will promote nutritious food and beverage choices consistent with the current Dietary Guidelines for Americans and Food Guidance System published jointly by the U.S. Department of Health and Human Services and the Department of Agriculture. In addition, in order to promote student health and reduce childhood obesity, the Superintendent or designee shall control food sales that compete with the District's non-profit food service in compliance with the Child Nutrition Act. Food service rules shall

REDUCED PHYSICAL ACTIVITY

CONCUSSION MANAGEMENT

WELLNESS



restrict the sale of foods of minimal nutritional value, as defined by the U.S. Department of Agriculture, in the food service areas during the meal periods and comply with all applicable rules of the Illinois State Board of Education.

Guidelines for Reimbursable School Meals

Reimbursable school meals served shall meet, at a minimum, the nutrition requirements and regulations for the National School Lunch Program and/or School Breakfast Program.

Monitoring

The Superintendent or designee shall provide periodic implementation data and/or reports to the Board concerning this policy's implementation sufficient to allow the Board to monitor and adjust the policy.

Community Input

The Superintendent or designee will invite suggestions and comments concerning the development, implementation, and improvement of the school wellness policy from community members, including parents, students, and representatives of the school food authority, school administrators, and the public.

WELLNESS POLICY

In 2010, District 146 established an initiative called "District 146 Gets Fit." This was in response to the development of Illinois School Code policy that requires the State Board of Education, in conjunction with the Department of Public Health, to develop guidelines for school boards to assist students with life-threatening food allergies and to promote healthy practices among students. The District 146 Wellness Committee, made up of stakeholders from across the District, including administrators, parents, students, nurses, and teachers regularly informs families and staff about healthy habits.

As a District, we recognize our responsibility to help students acquire the knowledge and skills to make informed choices necessary to establish and maintain healthy habits for a lifetime. We are committed to providing a learning environment that supports and promotes wellness, good nutrition, and an active lifestyle. We recognize that we cannot eliminate all allergic reactions due to food, and we cannot eliminate obesity or other health conditions associated with poor nutrition and lack of activity, but in accordance with the School Code we have developed a Wellness Policy that will take the necessary steps to create a school environment that does not contribute to these conditions.

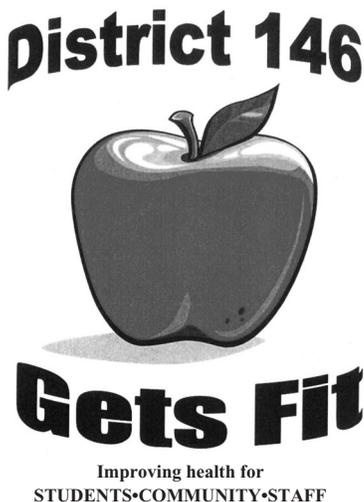
The following procedures were created with the safety of our children in mind, are aligned with best practices, and are responsive to changes to the Illinois School Code governing public schools in Illinois:

NUTRITION POLICIES

Birthday treats – Only non-food items such as stickers, bookmarks, stencils, collector's cards, etc. may be distributed to classmates. A list with other suggestions may be found on the District website.

Holiday parties – Classroom parties are held in October, December, and February. Any food and drink items sent in for distribution must be packaged and labeled by the manufacturer and approved by the classroom teacher no less than one week prior to the party. A list of recommended food and beverage options may be found on the District website. Please take note of the prohibited foods. Non-food items are encouraged.

Student rewards from staff – Staff members are encouraged to reward students with non-food items. Food or drink items used as rewards will be from the recommended list.



PHYSICAL ACTIVITY POLICIES

Movement breaks – Recognizing that students need a break from sitting for extended periods of time, every effort will be made to have a daily organized movement break. Students in elementary schools will have a 20-minute supervised recess period.

Physical activity and discipline – Staff will choose disciplinary consequences that do not interfere with recess, PE, or movement breaks. Additionally, staff may not use physical activity as a form of consequence.

Central Middle School Birthday Treats

The distribution of birthday treats or food is prohibited at Central Middle School.

Elementary Schools

Snack breaks may be provided for students to eat a nutritional snack brought from home. (Candy, gum, and cookies are some examples of inappropriate snacks for this time). Fruit or vegetables are great nutritional boosters.

Drinks are not part of snack break.

CENTRAL MIDDLE SCHOOL

NUTRITIONAL SNACK BREAKS

Chapter 6

STUDENT BEHAVIOR

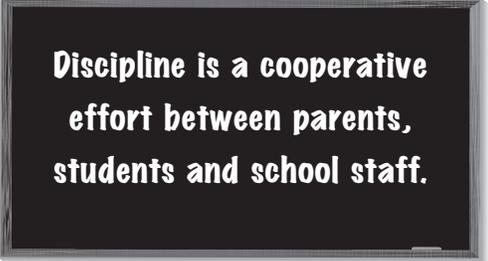
The development of student self-discipline is a goal of all District 146 schools. Self-discipline is regarded as a constructive form of discipline that contributes to individual growth. Staff members work with students to maintain good conduct at all times in the schools and at all school activities. District 146 disciplinary policies are based on The School Code of Illinois.

Discipline is a cooperative effort between parents and school staff. Discipline is also a crucial part of a student's learning environment. Cooperation among parents, students, and staff will lead to quality education for all students.

Disciplinary Measures May Include:

- parental contact
- detention
- conference with student
- conference with parent
- collaborative consultation
- student behavior plan/contract
- temporary removal from class
- referral to social worker
- referral to peer mediation
- referral to special services/agencies
- withdrawal of school-related privileges
- placement on behavioral social probation
- in-school suspension
- out-of-school suspension
- bus suspension (related to bus incidents)
- referral for truancy
- referral to law enforcement officials (police)
- alternative placement
- expulsion

DISTRICT DISCIPLINE POLICY



Discipline is a cooperative effort between parents, students and school staff.