

Health Criteria for School Attendance and Guidelines for the Administration of Medications

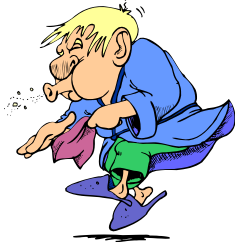
C.O.O.R. Educational Center

Revised 7/17/12



Children learn best when they are well and able to attend school regularly. When a child is not feeling well, he is not able to deal effectively with the demands of his illness and with the demands of school at the same time.

Some of our students have significant health issues. Some of our students take medications that have significant side effects. It is important for our students to attend school as much as possible. On the other hand, we do not want one student's illness spread to the other children and staff in the building.



Generally, a student who is too ill to participate in normal school activities should stay home. Please keep your student home at least 24 hours after the symptoms have stopped. Do not send your student to school if they have:

1. A temperature of 100 degrees or more (before they are sent home from school, the student will have their temperature taken at least twice by mouth or in the ear canal)
2. Diarrhea
3. Vomiting
4. Green purulent drainage from the nose
5. Heavy coughing
6. Other conditions that suggest the possibility of a communicable disease

If your student has any of these conditions due to medication, diet change, etc., please contact your student's teacher. The next pages detail our specific policies and procedures for infectious diseases/conditions.

The staff at the CEC understand how difficult it sometimes is to keep your student home when they are sick. It is even more difficult sometimes when the student gets sick at school. We will not send your sick student home without doing the best in our power to make sure the student really is sick. Whether a student should go home or not will be decided by at least two professionals who know the child. Sometimes, it will be best to have a professional who is not in the student's classroom be the second person confirming that the student is sick. The principal/supervisor, if available, will view the student. The C.E.C. also has a nurse on-call. If there are any concerns, the teacher or office staff may be able to contact the nurse.

We understand that it will take some time to arrange childcare and transportation when your sick student is sent home in the middle of the day. Rest assured that we would make the student comfortable in an isolated and supervised area of the building until you arrive.



RETURNING TO SCHOOL AFTER AN ILLNESS

Students kept home at the school's request or sent home by the school for an illness should not return to school for at least 24 hours after all of the symptoms for which they were sent home have subsided. If your child's symptoms persist, follow up with your health care provider. If you are unsure about when to keep your child home from school, or have questions about treatment, please contact your child's health care provider.

TRANSPORTATION

If a student is sent home from school for an illness, the transportations department will not pick the student the next school day. Transportation personnel have been instructed not to stop for students sent home from school for illness reasons for a minimum of 24 hours after which pick up will resume when the parents/guardians contact the transportation department indicating the student is well enough to return to school. In the cases of the very contagious diseases outlined in the "Health Criteria for School Attendance" guide book, parents will be required to provide a doctors note indicating the student is not contagious and is well enough to return to school.

We want you to know that we are striving to make our school a safe and healthy place for students to attend. We understand it can be difficult to follow some of our guidelines but they have been put in place to protect the best interest of our students. We can not do this without your assistance - we must work together if we are to succeed in protecting our students.



Head Lice

Every year head lice are a problem for families and schools. The C.O.O.R. Educational Center has instituted the following control measures:

- During school we will be checking students. If live lice or nits within a quarter of an inch of a student's scalp are found the parent/guardian will be called and the student sent home for treatment. If lice nits are found on a student's hair follicles farther than a quarter inch out from the scalp the student will be allowed to stay in school. Parents will be notified in writing and asked to remove nits and treat the student if needed.
- Transportation personnel will be instructed not to pick up the student who was sent home until contacted by the parent or guardian.

Please caution your child about sharing combs, hats or other clothing and layering coats, hats or other clothing on a pile with those of others. Parents/guardians will be notified when an outbreak of head lice occurs in a classroom.



Ringworm

- If a student is suspected of having Ringworm, they will be sent home for diagnosis and treatment.
- Transportation personnel will be instructed not to pick up the student until contacted by the parent or guardian. Transportation will not transport a student without a slip from a physician saying the student has been treated for Ringworm or that the student does not have Ringworm.
- Students who are capable of keeping lesions covered may return to school after they have been under treatment for 24 hours. If a student will not keep lesions covered, they should remain at home until all lesions are healed over.
- **A student must bring a physician's statement indicating they have received treatment for Ringworm when returning to school.**

While the student is being treated for Ringworm, it is important that their fingernails be short and clean. They should also keep the infected area clean and dry. Students with Ringworm should be encouraged to wash their hands often and carefully. Students with Ringworm should also have minimal close contact with other children. Parents/guardians will be notified when two or more cases of Ringworm occur at the same time in a classroom.



Scabies

- If a student is suspected of having Scabies, they will be sent home for diagnosis treatment.
- Transportation personnel will be instructed not to pick up the student until contacted by the parent or guardian. Transportation will not transport a student without a slip from a physician saying the student has been treated for Scabies or that the student does not have Scabies.
- Students who will keep lesions covered may return to school after they have been under treatment for 24 hours. If a student will not keep lesions covered they should remain at home until all lesions are healed over.
- **A student must bring a physician's statement indicating they have received treatment for Scabies when returning to school.**

While the student is being treated for Scabies, it is important that their fingernails be short and clean. Students with Scabies should be encouraged to wash their hands often and carefully. Students with Scabies should refrain from direct contact with other children as Scabies is most often transmitted by direct touch. Parents/guardians will be notified when two or more cases of Scabies occur at the same time in a classroom.



Impetigo

- If a student is suspected of having Impetigo, they will be sent home for diagnosis and treatment.
- Transportation personnel will be instructed not to pick up the student until contacted by the parent or guardian. Transportation will not transport a student without a slip from a physician saying the student has been treated for Impetigo or that the student does not have Impetigo.
- Students who are capable of keeping lesions covered may return to school after they have been under treatment for 24 hours. If a student will not keep lesions covered they should remain at home until all lesions are healed over.
- **A student must bring a physician's statement indicating they have received treatment for impetigo when returning to school.**

While the student is being treated for Impetigo it is important that their fingernails be short and clean. Students with Impetigo should be encouraged to wash their hands often and carefully. Parents/guardians will be notified when two or more cases of Impetigo occur at the same time in a classroom.



Chickenpox

- Chickenpox is a very contagious rash illness; if a student is suspected of having Chickenpox, they will be sent home for diagnosis and treatment.
- Transportation personnel will be instructed not to pick up the student until contacted by the parent or guardian.
- Students should not return to school until all blisters have crusted over and no new blisters appear. A person is contagious for at least 6 days after the rash appears and should not return to school during this time period. A student remains contagious as long as new blisters are appearing!

When a student has chickenpox, they will have raised watery blisters surrounded by a red area. New blisters, open blisters and crusted blisters may be present at the same time. The blisters may itch and it is recommended that fingernails be kept short and clean to reduce the possibility of infection from scratching. It is also recommended that tub baths for persons, with water mixed with a cup of baking soda, to reduce itching or the use of lotion that help diminish the itching, be used.



Conjunctivitis (Pink Eye)

- If a student is suspected of having Conjunctivitis, they will be sent home for treatment. It is strongly recommended that medical care be obtained. Conjunctivitis spreads very easily.
- Transportation personnel will be instructed not to pick up the student until contacted by the parent or guardian. The student will not be picked up for at least 24 hours, unless they have a physician's statement indicating they do not have conjunctivitis.
- **Students are to remain home until the eyes are clear (no discoloration is visible) or they have a physician statement saying they are not contagious.**

While the student is being treated for Conjunctivitis, it is important that they do not touch the infected eye to prevent the other eye from becoming infected. Students with Conjunctivitis should be encouraged to wash their hands often and carefully. If bacteria or a virus causes the infection, any make-up used by the student should be thrown away.

General Guidelines for the Administration of Medications At The C.O.O.R. Educational Center

Due to the on going medical needs of a student or the need to complete a prescribed course of medical treatment for a short-term illness, students may need to be administered medication at school. For the protection of our students, the COOR Educational Center has developed the guidelines and procedures in the attached section to insure accurate administration of medications.

Before a prescription medication can be given to a student at the CEC, an "Authorization for Administration of Medication" form must be completed and signed by a parent or guardian and also by the authorizing physician.

Before an over-the-counter medication can be given to a student at the CEC an "Authorizations for the Administration of Over-the-Counter Medications" form must be completed and signed by a parent or guardian. Such authorizations are only good for one month.

All medications sent to school must be in their original container. Prescription medications must be in a currently dated container with the appropriate label from the pharmacy on it. Parents or guardians must notify the school and submit a written physician's order in the event the prescription is discontinued or modified.

Medications sent to school are kept in a locked area. A daily record of administration is maintained for each student receiving medication, regardless of the medication or the length of time of administration.

MEDICATIONS

Before medication can be given to a student, an "Authorization for Administration of Medication" form must be completed and signed by a parent or guardian. Changes in dosages or time of administration of medication necessitates a new authorization being signed by both the doctor and parent or guardian.

Medications are to be kept in a locked container. A daily record of administration is to be maintained for each student receiving medication, regardless of the medication or length of time of administration at school. The staff person who gives the medication to the student is responsible for initialing the student's medication calendar.

GUIDELINES FOR ADMINISTERING PRESCRIBED MEDICATIONS IN SCHOOL

The C.O.O.R. Intermediate School District shall provide adequate control and supervision of medication prescribed by a physician for students enrolled in C.O.O.R. operated education programs.

GUIDELINES:

1. Medication administered to students by C.O.O.R. Intermediate School District personnel are limited to those *ordered in writing by a licensed physician* and authorized by the parent/legal guardian.
2. A valid form with the physician's order, signature, and *written authorization* from the parent/guardian requesting that the school district comply with the physician's order shall be filled out and returned to the school. The authorization form is valid for the current school year only, or for the control period placed on some drugs. The form will be kept on file in the classroom in which the medication is being administered.
3. The parents or guardian shall immediately notify the school district and shall submit a written physician's order in the event the prescription is discontinued or modified.
4. The medication must be brought to school in a container appropriately labeled by the physician or pharmacy. A minimum of a two week and a maximum of one month supply of medication is encouraged. Daily carrying of medication is to be avoided. Medication must be transported to school by giving it to the bus driver or bringing it directly to the classroom.
5. Refill of the prescription shall be the responsibility of the parent/guardian. The classroom teacher will aid the parent by sending a communication that medication supply is low if necessary. If a supply of medication, prescription change, etc., has not been given to the school, the school staff will not administer the medication.
5. All prescription medications will be maintained in a secure place, accessible to authorized personnel only.

GUIDELINES FOR ADMINISTERING SHORT-TERM PRESCRIPTION AND OVER-THE-COUNTER MEDICATIONS IN SCHOOL

Classroom staff members may administer short-term prescription and over-the-counter medications to students with written permission of parents/guardians. A copy of the required form can be found in Section 900 of this handbook. Additional copies can be obtained from either the classroom staff or from Gwen Bush in the C.O.O.R. Educational Center office.

Short-term prescription drugs are those intended to be given for less than four (4) weeks, such as antibiotics and decongestants.

Over-the-counter drugs include asthma sprays and inhalers, lotions, creams, ointments, aspirin, Tylenol, premenstrual syndrome medication, and cough syrup.

The medication must be brought to school in the original container. Daily carrying of medication is to be avoided. Refill of the drugs is the responsibility of the parent/guardian.

Such over-the-counter medications can be administered for a maximum of four (4) weeks.

All student medications will be kept in a location accessible only to authorized classroom staff.

C.O.O.R. Intermediate School District Authorization for Administration of Medication

Name of Student: _____ Birth date: _____

School: _____ Grade: _____

Physician's Order:

Student Name: _____

Diagnosis/Purpose of Medication: _____

Name of Medication: _____

Dosage: _____ Frequency: _____ Route: _____ Time: _____

Anticipated Duration: _____ if indefinite, so state:

This Prescription is:

- | | |
|--|---|
| <input type="checkbox"/> Initiation of Therapy | <input type="checkbox"/> Adjustment of Dosage |
| <input type="checkbox"/> Maintenance Dose | <input type="checkbox"/> Discontinuation of Therapy |

Comments regarding this Prescription: (include adverse reactions, precautions, etc.)

Physician's Signature: _____ **Date:** _____

The undersigned parent/guardian authorizes the C.O.O.R. Intermediate School District through its administrators or teachers to administer medication to my child.

It is understood that the undersigned parent/guardian shall immediately notify the school district in writing in the event the prescription shall be discontinued or modified.

The medication must be brought to school in a container appropriately labeled by the physician or pharmacy. Daily carrying of medication is to be avoided. Refill of the prescription shall be the responsibility of the parent/guardian.

Further, the undersigned releases the school district and shall indemnify said school district from any liability or damage which may result to the student from the administration of said medication as prescribed by the physician.

Signature of Parent/Guardian: _____ **Date:** _____

Management of Self-Administered Student Medication

Whenever possible, medication for students should be administered by parents/guardians at home. In cases when this is not possible, a school administrator, teacher or other school employee authorized to do so, may administer medication to a pupil in the presence of another adult employee. When pupils are competent to self-administer medication and have written parent/guardian and physician authorization, they may do so.

Students self-administering medication should follow these procedures:

1. There must be on file at school an authorization to self-administer medication signed by both the parent/guardian and the student's physician. This authorization should have clear directions on the amount of dosage, when the dosage should be taken and how the medication is to be taken.
2. Medications are to be in a container with a current pharmacist printed label with the following information:
 - Student's Name
 - Name of medication and dosage
 - Time of day or condition under which medication should be administered
 - Name of the physician
3. Medication is to be stored in a locked safe place, except for emergency types of medication that must be carried by the student (examples of medications a student may carry are asthma inhalers and bee sting kits).
4. For medication self-administered on a regular schedule, the student will sign off on a Medication Dispensation log just as staff are required to do for medication they administer.
5. For medication self-administered only in an emergency (or as needed) basis, the student should inform appropriate staff upon taking so the students may be observed for possible reactions to the medication. A note indicating when the medication was taken should be sent home with the students to inform parents.
6. Students who self-administer medications are responsible for the returning of any biohazard wastes they produce to their home for disposal. The student should provide the school with an appropriately labeled biohazard container that will be kept in the school office. This biohazard container should be large enough to hold a weeks worth of material and will be taken home by the student at the end of each week.

This information expires on June 30, _____.

SCHOOL-BASED ASTHMA MANAGEMENT PLAN

Endorsed by the Michigan Asthma Steering Committee of the Michigan Department of Community Health

STUDENT INFORMATION:

Child's Name: _____ Birth Date: _____

Grade: _____ Teacher: _____

Physical Education Days and Times: _____

EMERGENCY INFORMATION:

TO BE COMPLETED BY THE CHILD'S PARENT/GUARDIAN

Parent/Guardian Name: _____

First Priority Contact:

Name: _____

Phone: _____

Second Priority Contact:

Name: _____

Phone: _____

Doctor's Name: _____ Phone: _____

TO BE COMPLETED BY THE CHILD'S DOCTOR

WHAT TO DO IN AN ACUTE ASTHMA EPISODE:

1.

2.

3.

CALL 9-1-1 OR AN AMBULANCE IF: Review attached "Signs of an Asthma Emergency" and list any additional symptoms the child may present with:

DAILY MANAGEMENT PLAN – TO BE COMPLETED BY THE CHILD’S DOCTOR

Be aware of the following asthma triggers: _____

Severe Allergies: _____

MEDICATIONS TO BE GIVEN AT SCHOOL:

NAME OF MEDICINE	DOSAGE	WHEN TO USE

Side effects to be reported to health care provider: _____

Does this child have exercise-induced asthma? Yes No

This child uses an inhaler before engaging in physical exercise and if wheezing during physical activity.

Activity Restrictions (i.e., staying indoors for recess, limited activity during physical education):

Please check all that apply:

- I have instructed this child in the proper way to use his/her inhaled medications. It is my professional opinion that this child **should be allowed to carry and use** that medication by him/herself.
- It is my professional opinion that this child **should not** carry his/her inhaled medications or epi-pen by him/herself.
- Please contact my office for instructions in the use of this nebulizer, metered-dose inhaler, and/or epi-pen.
- I have instructed this child in the proper use of a peak flow meter. His/her personal best peak flow is: _____.

Physician’s Signature: _____

Date: _____

Parent/Guardian’s Signature(s): _____

Date: _____

_____ Date: _____

July 17, 2012

Insert Medication Dispensation Form