



Yi Hwang Academy of  
Language Excellence  
(YHALE)

**Health & Wellness Policies  
Including Nursing Program**

## Introduction

This document provides reference and policy guidance for the operation of the school health service and school nursing program. All stakeholders should follow the guidance of this document regarding students' health and wellness. Health equity is the attainment of the highest level of health for all people. Achieving health equity requires valuing everyone equally with focused and ongoing societal efforts to address avoidable inequalities, historical and contemporary injustices, and the elimination of health and health care disparities.

## Nursing Program

YHALE employs retains the services of a consulting nurse to ensure the general health and well-being of students and designates an administrator or administrative staff to be the healthcare technician and communicate with the consulting nurse. With the guidance and direction of the consulting nurse, the healthcare technician administers first aid and other minor medical treatment. The healthcare technician will administer to the students over-the-counter medications (such as, but not limited to, the actual or the generic of Tylenol, Advil, Motrin, Sudafed, Mylanta, Maalox, eye drops, topical creams/ointments, etc.) for minor illnesses or injury. **Students may not carry over-the-counter medication while on campus.**

All prescribed medication taken during school hours must be brought to the school healthcare technician in its original container with the label intact and up to date. The parent or guardian must fill out and sign a medication consent form for the healthcare technician to administer the medication.

Students with asthma or severe allergies may self-administer prescribed inhalers/EpiPens with written documentation from the prescribing physician and parent signed medical consent form. Students found sharing self-administered prescribed inhalers/EpiPens will not be allowed to continue to self-administer these medications.

**Any student who is self-administering a prescription drug, even with an appropriate prescription from a physician, will be deemed to be “misusing a legal drug” and therefore subject to disciplinary consequences.** Any student found to be in possession on campus of a legal drug, prescription or otherwise, will likely be found to be in violation of our policies with resulting disciplinary consequences. (Exceptions must remain in place, such as for students with asthma, as described above.)

All students leaving school to go home due to illness must report to the healthcare technician as part of the check out process. Students must also check out of the school office before leaving campus. Only those emergency contacts listed will be allowed to take a student home without permission from a parent or guardian.

### Immunization and Health Forms

The State of Georgia requires all students in all schools to have a current and updated certificate of immunization for all students. All new students must have on record at YHALE in the Infirmary a current Georgia form. Only the Georgia form (Ga. 3231) is considered valid by the State. Georgia law allows for only two types of exemptions from the immunization requirements: medical and religious. Medical exemptions must be updated by the medical doctor each year on a Ga. 3231 form. Religious exemptions are by affidavit and do not expire. These students will be excluded from school, until deemed medically safe to return to school by the Health Dept. in the case of an outbreak/epidemic of a contagious illness usually prevented by the required immunizations.

### 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 an emergency. 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 to avoid the potentially life-threatening short-term consequences of blood sugar levels that are either too high or too low. 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 school 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 but not limited to:

1. The symptoms of hypoglycemia for that student and the recommended treatment;
2. The symptoms of hyperglycemia for that student and the recommended treatment;
3. The frequency of blood glucose testing;
4. 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;
5. Times of meals and snacks and indications for additional snacks for exercise;
6. Full participation in exercise and sports, and any contraindications to exercise, or accommodations that must be made for that student;
7. Accommodations for school trips, after-school activities, class parties, and other school-related activities;
8. Education of all school personnel who may encounter the student about diabetes, how to recognize and treat hypoglycemia, how to recognize hyperglycemia, and when to call for assistance;

9. Medical and treatment issues that may affect the educational process of the student with diabetes; and

10. 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 shall coordinate the provision of diabetes care 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 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 Director of Operations, additional employees 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 a student's parent or guardian and if authorized by the student's individualized health care plan, a student with diabetes shall be permitted to perform blood glucose checks, administer insulin through the insulin delivery system the student uses, treat hypoglycemia and hyperglycemia, and otherwise attend to the monitoring and treatment of his or her diabetes in the classroom, in any area of the school or school grounds, and at any school related activity, and he or she shall be permitted to possess on his or her person at all times all necessary supplies and equipment to perform such monitoring and treatment functions.

#### 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 the following signs as per American Heart Association standards on AED use:

1. Is unconscious
2. Is not breathing
3. Have no signs of circulation (as confirmed by a pulse check)?

Only those staff members documented as having completed the required training shall be authorized to use an AED. The school nurse is responsible to ensure that all building AED's are properly inspected per manufactures recommendations. The Director of Operations 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 arise from any student, employee or individual who inappropriately accesses and/or uses an AED. All usage will be reported to the Governing Board.

#### Seizure & Epilepsy Action Plans

Parents or guardian should submit a written seizure action plan annually to obtain support and services for students being treated for epilepsy or seizure disorder:

The written action plan must be signed by the parents and child's physician. The plan must identify the student's diagnosis and include the following information:

- The student's particular symptoms including typical frequency, length, characteristics and any precursors or triggers
- Support and services the student may need while at school or participating in school activities, including in response to emergency conditions.
- List and description of students daily and emergency medications and guidance on administration
- Special conditions, safety precautions and emergency procedures to be considered by school and employees to facilitate student's access to and participation in educational programs and school related functions

- Students level of understanding and ability to self-manage their condition
- State of acknowledgement and release from parents or guardian authorizing the sharing of medical information by physician to school and for the school nurse to share with necessary school employees
- Complete and updated contact information for parents/guardians and treating physician.

YHALE shall:

- Ensure the school nurse reviews plan
- Ensure the school nurse or trained seizure action plan personnel are on site during regular school hours to provide support and services, if needed. If the school nurse or trained personnel are unavailable, other personnel are authorized to call 911
  - Parent/guardian may accompany student on field trips or school related functions in lieu of trained school personnel
  - No YHALE employee, with the exception of the school nurse, may be disciplined for refusing to serve as training personnel and cannot be liable for damages resulting from taking reasonable action
    - Ensure a copy of the plan is readily available at all times to the main office and school clinic personnel. A copy must also be available to designated school personnel supervising student on field trips or other school related functions away from school
  - Ensure at least one member of the school staff per grade must receive training in the following
    - Basic understanding of epilepsy and seizure disorders
    - Associated medical and treatment issues that can affect educational process for student
    - Assessing a students' level of understanding and ability to self-manage
    - Recognition of common symptoms and complications
    - Providing support and services to students with epilepsy and seizure disorders
    - Maintaining communication with student, parents, school nurse and student's teacher.

#### Supplies of Glucagon

- YHALE shall maintain a supply of glucagon for students with diabetes and a diabetes medical management plan to be administered by the student, school nurse or trained glucagon personnel.
- The school nurse is responsible for ensuring proper storage, maintenance and distribution of the Glucagon.

#### Lice Policy

Head lice do not carry communicable disease and are primarily spread through direct head to head contact; and only live 18-24 hours off a host. The school is responsible for inspection, not treatment, of head lice, and YHALE cannot guarantee that every single case will be identified. If live (crawling) lice are found, the nurse will notify the parent and the child will be sent home for treatment. A child will not necessarily be sent home for nits alone. The child may return the next day after treatment. The parent will be responsible for treating lice before the child can return to school, (notifying the child's friends is advised.) The healthcare technician will perform an inspection upon return. YHALE will send an email notification to parents and teachers in the classroom and/or grade level, excluding personal identification information, stating a case of head lice has been reported and asking parents to check their child's hair.

#### Dietary Restrictions

To help ensure the safety and wellness of our students, parents requesting a special diet for their child will need to adhere to the following guidelines:

1. A signed prescription from a medical doctor is required for all special diet requests.
2. Parents of students with special diets must sign a YHALE Dietary Restriction Form, kept on file.

YHALE is nut-free school. Please do not send students to school with snacks or lunches that contain peanuts, tree nuts (almond, brazil, cashew, chestnut, hazelnut, macadamia, pecan, pine, pistachio, and walnut), or sesame seeds. Foods containing peanuts, tree nuts, or sesame seeds as ingredients, (e.g. baked goods, hummus, tahini, crackers, sauces, and dressings) are also forbidden.

### Specific Nursing Procedures

Notification:

Parents/guardians will be notified of any major illness/injury including but not limited to the following:

1. Head Injury
2. Eye Injury
3. Facial injury
4. Oral temperature of 99.5 degrees F or above
5. Diarrhea and/or Vomiting
6. Unexpected health problem
7. Suspected infectious disease
8. Probable sprained or broken limb
9. Reoccurring complaint(s)
10. Poisonous substance ingestion
11. Swallowing a foreign object
12. Animal/human bite
13. Live lice or nits
14. Puncture wound
15. Fall from an area greater than the child's height
16. Seizure if there is no history of seizures
17. Seizure greater than five minutes
18. Any time emergency medical services have been called

### Exclusion and Readmission:

In order to assist in preventing the spread of illness, students should not be given fever-reducing medication in order to return to school. In addition, the following guidelines have been established regarding the exclusion and readmission to school due to illness:

1. Diarrhea/Watery Stools:

a. Students will be sent home from school for:

- (1) More than two episodes of diarrhea occurring during a school day.
- (2) One episode of diarrhea if other symptoms are present (e.g. fever, abdominal discomfort, vomiting, etc.)
- (3) Soiling themselves or their clothing.

b. Students may return to school 24 hours after the last diarrhea stool if they have no other symptoms present.

## 2. Vomiting:

a. Students will be sent home from school for:

- (1) More than one episode of vomiting occurring during a school day.
- (2) One episode of vomiting if other symptoms are present (e.g. fever, abdominal discomfort, diarrhea, etc.).

b. Students may return to school 24 hours after the last vomiting episode if they have no other symptoms present.

## 3. Fever (Normal oral temperature is 98.6 degrees F):

a. Low-grade (Oral temperature 99.5 to 100.3 degrees F):

- (1) The school nurse will notify the parent/guardian of students with low-grade fever.
- (2) Students with low-grade fever may remain in school if no other symptoms are present.
- (3) Students will be sent home from school with low-grade fever if other symptoms (e.g. cough, sore throat, headache, abdominal discomfort, etc.) are present.
- (4) Student should NOT be given fever-reducing medication in order to return to school.

b. High-grade:

- (1) Oral temperature of 100.4 degrees F or above:
  - (a) Students will be sent home from school for a high-grade fever.
  - (b) Students may not return to school until free of fever for 24 hours.
  - (c) Students will not be dismissed to the bus with a high-grade fever.
- (2) Oral temperature of 104 degrees F or above:
  - (a) The school nurse will institute measures to bring down the child's temperature:
    - 1) Allow student to lie down on cot.
    - 2) Ask/assist student to remove outer layers of clothing, such as a jacket, sweater, second shirt, and shoes.
    - 3) Do not place blanket on student.
    - 4) Apply cool washcloth or towel to student's forehead and arm pits (if area is accessible). Keep cloths cool and damp.
    - 5) Offer sips of cool water only if student is not vomiting and is free of abdominal pains.
      - (b) The parent/guardian will be notified immediately.
      - (c) The school nurse/trained clinic personnel will initiate the school's Emergency Management Plan if the parent/guardian is unable to arrive at school within fifteen minutes to pick up their student. (See Section E of Rule JGC)
      - (d) The school nurse/trained clinic personnel will notify school administrator that 911 has been called.

## 4. Drainage:

a. It is not necessary to exclude every student from school who has drainage from the nose, eye, ear or open sores.

b. Exclusion from school will be at the discretion of the school nurse, and/or principal or designee based on the following criteria:

- (1) Color of discharge
- (2) Student's personal hygiene skills and need for assistance

(3) Classroom setting

(4) Student's developmental level

### Allergies

Allergic reactions can span a wide range of severity of symptoms. The most severe and potentially life threatening reaction is anaphylaxis. YHALE cannot guarantee to provide an allergen-free environment for all students with life-threatening allergies or prevent any harm to students in emergencies. The goal is to minimize the risk of exposure to food allergens that pose a threat to those students, educate the community, and maintain and regularly update a system-wide protocol for responding to their needs. A system-wide effort requires the cooperation of all groups of people within the system.

The goal of YHALE regarding Life Threatening Allergies is to engage in a system-wide effort to:

Prevent any occurrence of life threatening allergic reactions,

Prepare for any allergic reactions, and

Respond appropriately to any allergy emergencies that arise

The school consulting nurse, in conjunction with the student's parent(s)/guardian(s) and the primary care provider/allergist will prepare an Allergy Action Plan/Individual Health Care Plan for any student with a life-threatening allergy. The plans will be reviewed by the school nurse, the student's parent(s)/guardian(s) and primary care provider and/or the student's allergist, and signed off by the child's parent indicating that he/she deems it to be adequate. Multiple copies of the Allergy Action Plan/Individual Health Care Plan will be kept at the school for quick access in the main office and the student's homeroom, and in the student's target language teacher's room.

EpiPens will be available in the nurse's office and those prescribed for individual students will be kept in that child's homeroom emergency backpack or, with permission, carried by the child at all times. Staff will be trained to identify and respond to reactions from life threatening allergies, including the use of EpiPens. Any staff involved with students who have life threatening allergies will be informed by the parents and provided information from the Allergy Action Plan of each of these students. School staff will take steps to ensure that these classrooms and instructional areas are as allergen free as possible. During lunch, YHALE will encourage "NO NUTS" and "NO FOOD TRADING" and "NO UTENSIL SHARING" to minimize accidental exposure to allergens.

It is requested that each parent of a student with a life-threatening allergy inform the school nurse/administration of the child's allergies prior to the opening of school (or as soon as possible after a diagnosis). Parents must arrange to meet with the school nurse/administration to develop an Allergy Action Plan/Individual Health Care Plan for the student and provide medical information from the child's treating physician as needed to write the plans.



See the YHALE Student & Family Handbook for further parental suggestions.

Legal References:

GA Code § 20-2-186 (2015), (a) (5) Program Weights and Funding Requirements

§ 20-2-191 - Supplies for school health nurse programs

§ 20-2-770 - Rules and regulations for nutritional screening and eye, ear, and dental examinations of students  
Subject 511-5-6 Vision, Hearing, Dental, and Nutrition Screening of Children Entering Public Schools.

§ 20-2-771 - Immunization of students

§ 20-2-771.2- School Health Nurse Programs

§ 20-2-772 - Rules and regulations for screening of students for scoliosis

§ 20-2-774 - Self-administration of asthma medication

§ 20-2-775 - Automated external defibrillator required in high schools; requirements; funding

§ 20-2-776 - "Auto-injectable epinephrine" defined; requirements for student retention of medication; liability of school system

§ 20-2-776.1 - Administration of auto-injectable epinephrine by school personnel

§ 20-2-777 - Annual fitness assessment program; reporting and compliance

§ 20-2-778 - Required information to parents of students regarding meningococcal meningitis

§ 20-2-779 - Care of students with diabetes; definitions; training of school employees; diabetes medical management plan; no liability for staff; application to private schools

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