

Student Health Services and Requirements

The purpose of school health services shall be to supplement the efforts and guidance of parents/guardians to raise student awareness of the benefits of regular health care.

The objectives of school health services are:

1. To promote good health habits among students.
2. To encourage a safe and healthful environment in school.
3. To assist in the identification and referral to appropriate health care providers for medical, psychological and physical needs.

Student health records

Student health records shall remain confidential and be maintained by the health office staff and kept in a separate and secure health file in the school health office.

Access to the health files shall be limited to only those school personnel who have a specific and legitimate educational interest in the information for use in furthering a student's academic achievement or maintaining a safe and orderly teaching environment.

The health office staff shall maintain a log showing who has been given access, when access occurred, and to which specific records.

Annual screening programs

The vision and hearing of all students in kindergarten, first, second, third, fifth, seventh and ninth grades shall be tested during the school year by district health services personnel and/or other trained persons authorized by the district, as required by law. These screenings shall not be required of any student whose parent/guardian objects on religious or personal grounds.

The parent/ guardian shall be informed if a student fails any part of the screening.

Parental consent

Parental consent shall be required for all examinations noted above if given by a school health care provider or under auspices of the school. However, parental consent shall not be mandatory to refer a student 15 and over, to public health or other health care practitioners for medical services in connection with pregnancy, sexually transmitted infections, or alcohol/drug abuse. The district shall encourage students to seek health services related to such problems with or without parental consent.

As otherwise provided by law, parents/guardians and eligible students (students 18 years of age or older or an emancipated minor) shall receive notice and have the opportunity to opt a student out of any non-emergency, invasive physical examination or screening (such as routine hearing, vision, and dental screenings) that is:

1. normally required as a condition of attendance;
2. administered by the school and scheduled by the school in advance; and
3. not necessary to protect the immediate health and safety of the student, or other students.

Dental health

The district shall participate in programs to encourage good dental health including instruction, dental examination clinics when available and referral to agencies which can provide aid for those in need.

Communicable diseases

Students showing possible symptoms of a communicable disease or an infectious illness shall be referred to health office staff. As appropriate a district school nurse will be notified and assist in identifying the action necessary to protect the health of other students and staff.

Special health problems

District health services personnel shall assist teachers and building principals in making any necessary arrangements with the family health care practitioner for the welfare of a student with special health problems. Requests that health care procedures be performed at school shall be evaluated in accordance with Board policies and regulations to determine whether and under what conditions a requested procedure may be appropriately conducted in the school environment.

Medications shall be administered only in accordance with Board policy.

School personnel shall be specifically notified of any students with significant health conditions in their building as long as such notification is required to meet a student's needs. School personnel shall be informed of any reactions/symptoms that may be observed from students with medical conditions such as for diabetes, epilepsy and asthma.

Note: A health care practitioner is defined as a licensed health care provider.

Adopted: February 8, 1986
Revised: June 25, 1986
Revised: February 9, 1994
Revised: June 11, 2008
Revised: June 24, 2015

LEGAL REFS.: 20 U.S.C. 7906 (prohibition against the use of Title I funds to operate a program of contraception distribution in the schools)
C.R.S. 13-22-102, 103 (minors may consent to medical treatment)
C.R.S. 22-1-116 (vision and hearing tests)
C.R.S. 22-32-109 (1)(ee) (duty to adopt a policy prohibiting personnel from recommending or requiring certain drugs for students or ordering behavior tests without parental permission)

C.R.S. 22-32-110 (1)(bb) (power to recommend examinations of students)
C.R.S. 22-33-106 (2) (grounds for suspension, expulsion, denial of admission)
C.R.S. 25-4-402 (parental consent not required to treat minor for sexually transmitted infection)
C.R.S. 25-4-901 *et seq.* (school entry immunization)
C.R.S. 25-6-102 (dissemination of contraceptive information)

CROSS REFS.: GBEB, Staff Conduct
JF, Admission and Denial of Admission
JLCB, Immunization of Students
JLCC, Communicable/Infectious Diseases
JLCD, Administering Medications to Students
JLDAC, Screening/Testing of Students (and Treatment of Mental Disorders)
JLCE, First Aid and Emergency Medical Care