

Healthy and Ready to Learn: • A Back to School • Webinar

Sept. 12, 2016
2:30 – 4 pm CDT

• (1.5 CNE contact hours for participants
attending entire event)



Presenters

- Jessica Gerdes, MSN, RN, IL-PEL/School Nurse, NCSN
Illinois State Board of Education
Principal Consultant: School Nursing, Health Issues
Chicago, IL
- Jan Daniels, BS
Regional Immunization Coordinator
West Chicago Region
Immunization Program – Illinois Department of Public Health
- Victoria Jackson, RN, MS, IL-PEL/School Nurse
School Health Program Administrator
Office of Women's Health and Family Services
Illinois Department of Public Health
Springfield, IL
- Jessica Rush, Administrative Professional I
Illinois State Board of Education
Springfield, IL

Learning Objectives

- Participants will be able to describe school health tasks that are required to be completed each year in Illinois public schools.
- Participants will be able to discuss the implications to school nursing practice from new or revised Illinois laws, rules, and guidance.
- Participants will be able to describe what changes in their district's policies and procedures need revision to comply with federal or state laws or rules.
- Participants will be able to describe strategies that the Illinois State Board of Education (ISBE) has fostered that are directly related to school health services in the ISBE goal:

“Every school offers a safe and healthy learning environment for all students.”

Access to Certificate and CNE

- This professional development created by ISBE, with technical assistance from Illinois Department of Public Health, meets requirements for CNE as described in Illinois Nurse Practice Act.
- Participants will be awarded 1.5 continuing nursing education hours after completion of the evaluation form.
- The evaluation form will be provided to all those registered and who attend the entire session, as certified by the ISBE teleconference attendance log.
- A certificate will be emailed to all who completed the evaluation and attended the entire event.

Topics to be covered:

- Immunizations
- Physical exams
- Eye exams
- Dental exams
- Reporting to IWAS
- Exclusion rules and exemptions
- Opioid and anaphylaxis reversal drugs
- Concussion prevention and treatment
- Health requirements for school staff
- Medical cannabis
- Medication administration
- Nursing regulations
- Guidance on best practices

New and Revised Laws in Illinois School Health



New Laws in School Health

- Asthma Action Plan
 - Protocol
 - Training
 - Plans requested from parents
 - Maintained by school nurse (if available)
- Concussion reporting requirement by ATC to association
- Report to ISBE upon adoption or change of undesignated epinephrine policy
- Staff training on Americans with Disabilities Act
- Related rules (when available):
 - <http://www.isbe.net/rules/default.htm>



Asthma Action Plan Law

- P.A. 99-0843
- requires each district and school (including charter and nonpublic) to request Asthma Action Plan from parent
- Requires ISBE to develop a model asthma emergency response protocol
- Requires each district and school to adopt a similar protocol by Jan. 1, 2017

Student Concussions Law

- P.A. 99-245 requires school districts to adopt policies and procedures related to concussions or head injuries in student athletes to ensure that these injuries are "properly evaluated and managed."
- Requires that each concussion oversight team must include, to the extent practicable, at least one physician and school nurse.
- ISBE Rule Section 1.530 b and c:
 - Parents or guardians of student athletes receive and read information about concussions. The information must meet each of the requirements of Section 22-80 of the School Code. A student will be unable to participate in interscholastic athletics until he or she and his or her parent or guardian acknowledge by written signature that they received and reviewed the information.
 - School emergency procedures must now address student athletes and meet the requirements of Section 22-80 of the School Code.

Training Requirements

- Nurse - a course approved by IDFPR
 - Any training that carries CNE, CME, or otherwise meets the requirements for RN renewal in Illinois, meets this requirement
 - No set number of hours required
 - IASN will provide a training session at annual conference in October 2016 in Springfield with continuing nursing education credits
 - Additional trainings under development
- Coaches: a course of at least two hours length
 - Directed by IHSA and IESA

New Law Related to Concussion Law

- P.A. 99-0831, signed August 19, 2016, effective immediately, amends the Interscholastic Athletic Organization Act beginning with the 2016-2017 school year.
- Requires an association or other entity that has, as one of its purposes, promoting, sponsoring, regulating, or in any manner providing for interscholastic athletics, or any form of athletic competition among high schools and high school students within this State, to require all member schools that have certified athletic trainers to complete a monthly report on student-athletes at the member school who have sustained a concussion.
- Requires the schools to complete a monthly report on student-athletes at the member school who have sustained a concussion during a school-sponsored activity overseen by the athletic trainer, or when the athletic director is made aware of a concussion sustained by a student during a school-sponsored event.
- No report to ISBE

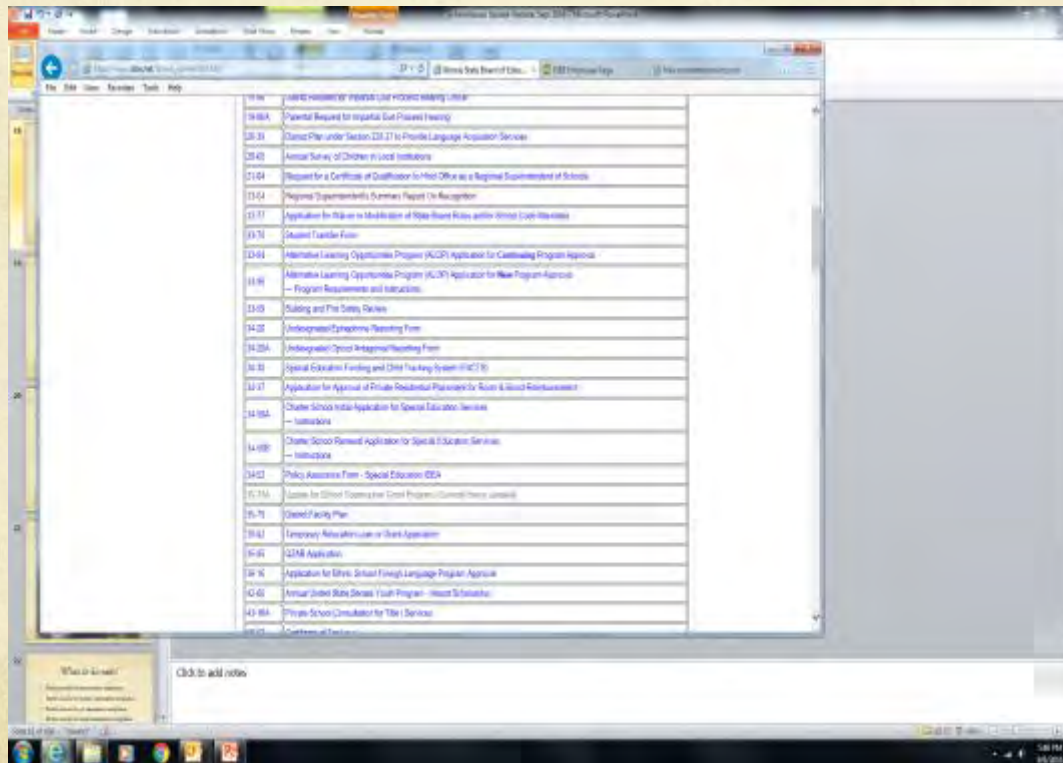
Undesignated Epinephrine Act

- Authorizes *but does not require* undesignated epinephrine to be available in Illinois schools
- Allows administration of undesignated epinephrine to any person not previously known to have severe allergy and/or not previously given a prescription for epinephrine
- Requires a report to ISBE within three days of the administration of undesignated epinephrine to one not previously known or not with a previous medical order
- Form at <http://www.isbe.net/spec-ed/pdfs/34-20-undesignated-epinephrine-rptg.pdf>. Summary of reports 2014-15 school year available on ISBE website.
- Guidance is at: <http://www.isbe.net/spec-ed/pdfs/guidance-15-02-self-admin-epi.pdf>
- Revisions to law:
 - expands the locations where undesignated epinephrine may be kept and used (restaurants, child care centers, etc.)
 - adds that private (contracted) school bus transportation companies are allowed to adopt policy and drug
 - requires districts to notify ISBE upon adoption or revision of policy

ISBE Forms for Reporting Administration of Undesignated Epinephrine and Opioid Antagonist

Form 34-20 Epinephrine

Form 34-20a Opioid Antagonist



http://www.isbe.net/forms_numerical1.htm

Americans with Disabilities Act

Instruction for School Staff

School Code: (105 ILCS 5/3-11)

Sec. 3-11. Beginning with the 2009-2010 school year, the teachers institutes shall include instruction on prevalent student chronic health conditions.

Beginning with the 2016-17 school year, the teachers institutes shall include, at least once every two years, instruction on the federal Americans with Disabilities Act as it pertains to the school environment.

What do I have to do first?

- Get help

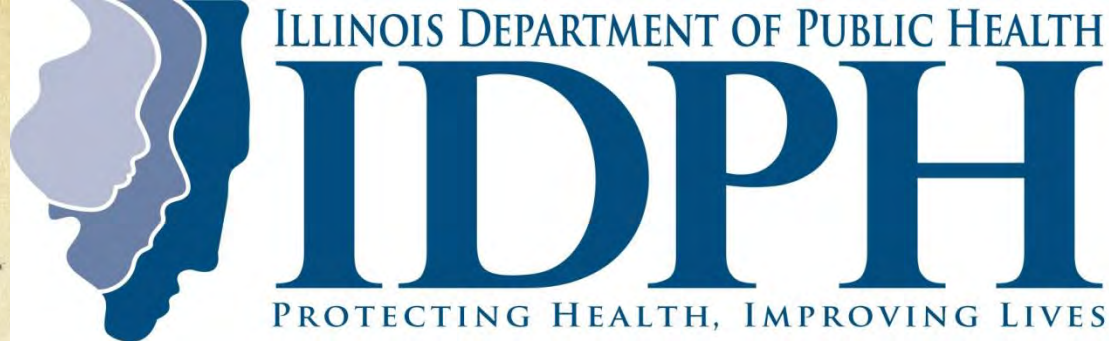


First Things First!

- Find out your school district's exclusion policy (not practice). Assure school or district board-approved policy for any exclusion date prior to Oct. 15, 2016
- Review records for immunization compliance
- Review records for physical examination compliance
- Review records for eye examination compliance
- Review records for dental examination compliance
- Send notices of noncompliance to parents with pending date of exclusion
- Involve principal / school administrator - do not exclude without their involvement, acknowledgement, signatures

So, how do I figure out
compliance?





2016-2017 IMMUNIZATION REQUIREMENTS FOR SCHOOL ATTENDANCE

JANET DANIELS

ILLINOIS DEPARTMENT OF PUBLIC HEALTH
REGIONAL IMMUNIZATION COORDINATOR

SEPTEMBER 12, 2016

IDPH MISSION

**PROTECT THE HEALTH AND WELLNESS OF THE
PEOPLE IN ILLINOIS THROUGH THE PREVENTION,
HEALTH PROMOTION, REGULATION, AND THE
CONTROL OF DISEASE AND INJURY.**

Disclosures

I have no relevant financial relationships with the manufacturer(s) of any commercial products(s) and/or provider(s) of commercial services discussed within this CNE activity.

I do NOT intend to discuss an unapproved or investigative use of a commercial product/device in my presentation.

School Compliance Aid

Mandated Intervals Between Shots

1 Month = 4 Weeks / 28 Days

2 Months = 8 Weeks / 56 Days

4 Months = 16 Weeks/112 Days

One year of age = On or after the first birthday.

For Preschool hepatitis B only:

6 months of age = 24 weeks = 168 days

A “4 day grace period” can only be applied with provision of a provider note. These must be reviewed by IDPH.

For LIVE virus vaccines (i.e. MMR, Varicella or FluMist) if the interval between any 2 live doses is < 28 days, the vaccine administered second cannot be counted as valid and must be repeated.

The “4 day grace period” **is not** accepted on 28 day interval between 2 live-virus vaccines.

Laboratory Evidence of Immunity

- + IgG or titers accepted for measles, rubella, mumps and varicella.
- Hepatitis B **infection**: HBsAg, anti-HBc and/or anti-HBs.
- Lab evidence of immunity is not allowed for Hib, pneumococcal, diphtheria, tetanus, pertussis, polio or meningococcal vaccines.

Students Affected by School Requirements

- Public AND Private Schools
- Rules Target Students by Grade.
- Students attending ungraded school programs (including special education), must comply in accordance with grade equivalent:
 - * Kindergarten = 5 years of age
 - * 6th graders = 11 years of age
 - * 9th graders = 15 years of age

6 KEY POINTS for Immunity Reviews

1. Any vaccine dose administered at an interval less than required in Illinois or prior to the age required cannot be accepted as valid.
2. If a health care provider* feels that a child is adequately immunized, or a specific immunization is not necessary or indicated, then the provider must submit documentation (provider note) to school authorities.
3. When a health care provider claims a child is immune, the provider must submit laboratory documentation of the child's immunity to school authorities.

6 KEY POINTS for Immunity Reviews

4. All proof of immunity documentation must be reviewed by designated IDPH Immunization staff with parental consent.
5. While waiting for the notes to be reviewed, consider the student as in compliance but unprotected.
6. If IDPH determines the provider statement is not acceptable to prove immunity, then the student is no longer considered to be in compliance and is subject to the exclusion provision of the law.

Superintendent of Schools (ISBE)

Weekly Message June 25, 2015

SECURING AND SUBMITTING PARENTAL PERMISSION WITH ANY STUDENT DOCUMENTATION

- Reviewed record must be accompanied by signed statement of written permission from parent.
- Must be signed and dated, oral consent does not meet the consent requirements.
- Schools may create a form or letter that meets requirements
- Any request pending at IPDH must be resubmitted with a copy of the written parental consent.

When Submitting Records for IDPH Review

- Reviewed record must be accompanied by signed statement of written permission from parent.
- Include student's name, D.O.B. and current grade level.
- All physician's notes/statements and current Certificate Child Health Examination Form.
- School contact information; including phone number, fax number and if possible email address.
- Make sure that ALL documents being submitted are legible.

FOR 6th GRADE ENTRY:

Submitting a schedule to receive Tdap and/or meningococcal conjugate vaccine...

Per Section 665.270 of the School Code...

If a schedule/note is submitted stating that the student will receive his/her Tdap or MCV4 during the school year when they **turn 11**, it is considered a schedule, accepted and considered compliant but unprotected on schedule.

Required Immunizations

School Year 2016-2017

Kindergarten – 12th grade

- DTaP
- Polio
- MMR
- Varicella
- Hepatitis B
- Tdap
- Meningococcal Conjugate

Preschool/Early Childhood/Childcare Center

- DTaP
- Polio
- MMR
- Varicella
- Hepatitis B
- Hib
- Pneumococcal Conjugate



Minimum Immunization Requirements for Those Entering a Child Care Facility or School in Illinois, Fall-2016 (Page 1)

Vaccine Requirement	Child Care Facility, Preschool, Early Childhood Pre-Kindergarten Programs	Kindergarten through 12 th Grade		Minimum Intervals Allowed Between Doses and Other Options for Proof of Immunity
		First Entry into School (Kindergarten or First Grade)	Other Grades	
DTP/DTaP/ or Tdap, Td (Diphtheria, Tetanus, Pertussis)	Three doses by 1 year of age One additional booster dose by 2 nd birthday	Four or more doses of DTP/DTaP with the last dose qualifying as a booster and received on or after the 4 th birthday	Three or more doses of DTP/DTaP or Td; with the last dose qualifying as a booster if received on or after the 4 th birthday For Students entering 6 th thru 12 th grades: 1 dose of Tdap	Minimum interval between series doses: 4 weeks (28 days) Between series and booster: 6 months <i>No proof of immunity allowed</i>
Polio	Two doses by 1 year of age. One additional dose by 2 nd birthday	Four or more doses of the same type of Polio vaccine with the last dose qualifying as a booster and received on or after the 4 th birthday. (progressive requirement)	Three or more doses of Polio with the last dose qualifying as a booster and received on or after the 4 th birthday. *If the series is given in any combination of polio vaccine types, 4 or more doses are required with the last being a booster on or after the 4 th birthday.	Minimum interval between series doses: 4 weeks (28 days) For Grade K: 6 month interval between 3 dose series and booster; booster must be on or after 4 th birthday <i>No proof of immunity allowed</i>
Measles	One dose on or after the 1 st birthday but prior to 24 months of age	Two doses of Measles Vaccine, the 1 st dose must have been received on after the 1 st birthday and the second dose no less than 4 weeks (28 days) later.		Laboratory evidence of measles immunity <u>OR</u> Certified physician verification* of measles disease by date of illness <i>*Cases diagnosed after 7/1/2002 must include lab evidence of infection</i>
Rubella	One dose on or after the 1 st birthday but prior to 24 months of age	Two doses of Rubella Vaccine, the 1 st dose must have been received on after the 1 st birthday and the second dose no less than 4 weeks (28 days) later.		Laboratory evidence of rubella immunity History of disease is not acceptable proof of immunity to rubella
Mumps	One dose on or after the 1 st birthday but prior to 24 months of age	Two doses of Mumps Vaccine, the 1 st dose must have been received on after the 1 st birthday and the second dose no less than 4 weeks (28 days) later.		Laboratory evidence of mumps immunity OR Certified physician verification of mumps disease by date of illness
<i>Haemophilus influenzae</i> type b	Refer to Hib ACIP recs for schedule for series Children 24-59 mos. without series must have one dose after 15 mos. of age	Not required after the 5 th birthday (60 months of age)		Refer to ACIP Hib vaccination schedule <i>No proof of immunity allowed</i>
Invasive Pneumococcal Disease	Refer to PCV ACIP recs for schedule for series Children 24-59 mos. without series must have one dose after 24 months of age	Not required after the 5 th birthday (60 months of age)		Refer to ACIP PCV vaccination schedule <i>No proof of immunity allowed</i>

Minimum Immunization Requirements for Those Entering a Child Care Facility or School in Illinois, Fall-2016 (Page 2)

Vaccine Requirement	Child Care Facility, Preschool, Early Childhood Pre-Kindergarten Programs	Kindergarten through 12 th Grade		<u>Minimum Intervals Allowed Between Doses and Other Options for Proof of Immunity</u>
		First Entry into School (Kindergarten or First Grade)	All Other Grades	
Hepatitis B	Three doses for all children Third dose must have been administered on or after 6 months of age (168 days)	No Requirements	For Students entering grades 6 thru 12: Three doses hepatitis B vaccine administered at recommended intervals	Minimum intervals between doses: 1 & 2- at least 4 weeks (28 days) 2 & 3 - at least 2 months (56 days) 1 & 3 - at least 4 months (112 days) <i>Laboratory evidence of prior or current infection</i>
Varicella (progressive requirement)	One dose on or after 1 st birthday	Two doses of Varicella Vaccine, for Students entering Kindergarten or first grade The 1 st dose must have been received on after the 1 st birthday and the second dose no less than 4 weeks (28 days) later.	One dose of Varicella on or after the 1 st birthday for Students entering grades 3, 4, 5, & 12	Minimum intervals for administration: The 1 st dose must have been received on after the 1 st birthday and the second dose no less than 4 weeks (28 days) later. <i>Statement from physician or health care provider verifying disease history OR</i> <i>Laboratory evidence of varicella immunity</i>
			Two doses of Varicella Vaccine for Students entering grades 2, 6, 7, 8, 9, 10, & 11	
Meningococcal Conjugate Vaccine (progressive requirement)	No Requirements	No Requirements	Applies to Students entering grades 6, 7, or 12 beginning 2016-2017 school year 1 dose of Meningococcal vaccine for entry to grade 6 or 7 2 doses of Meningococcal vaccine at entry to 12 th grade	Minimum intervals for administration: The first dose received on or after the 10 th birthday; second dose at least eight weeks after the 1 st dose. Only one dose is required if the first dose was received at 16 years of age or older. <i>No proof of immunity allowed.</i>

Source: Child Health Examination Code/Part 665

Prepared by: Illinois Department of Public Health Immunization Section, January 2016

List of Non-immunized Child Care Facility Attendees or Students

Child and Student Health Examination and Immunization Code
Part 665/Section 665.290

Every child care facility and attendance center shall maintain an accurate list of all children and students who have not presented proof of immunity against any or all of the required immunizations as noted in Section 665.240 or Section 665.280.



Minimum Immunization Requirements for Those Entering a Child Care Facility or School in Illinois, Fall-2016

The requirements also apply to children who transfer into Illinois child care facilities, school programs and schools from

- Other programs or schools in Illinois**
- Other schools in other states regardless of the age or grade level at which the child transfers.**

School Compliance

Two types of exemptions allowed in Illinois: Medical and Religious

MEDICAL OBJECTION

- Must indicate the student's medical condition that contraindicates the specific immunization
- Must be written by a MD, DO, APN or PA
- The medical objection documentation should be received and honored by appropriate school personnel.
- These students must be placed on a susceptible list and subject to immediate exclusion if vaccine-preventable disease or contact is identified at the school.

RELIGIOUS EXEMPTION

- Must detail specific religious belief which conflicts with the specific immunization and or exam.
- Must use the Certificate of Religious Objection form.
- Must be signed by health care provider (MD/DO; APN; PA) responsible for the performing the health exam.
- Provider signature attests to informing the parents of the benefits of immunization and health risk of not vaccinating to the student and to the community.
- Local school authority is responsible for determining whether written statement constitutes a valid religious objection.

Both Exemptions are not to be sent to IDPH for review

“Students eligible to remain in public school beyond grade 12 (special education) shall meet the requirements for 12th grade.”

Which means these students must be compliant with requirements for Tdap, 2 doses of MMR, Meningococcal (MCV4), Varicella, Hepatitis B and Polio

**ILLINOIS CERTIFICATE OF RELIGIOUS EXEMPTION
TO REQUIRED IMMUNIZATIONS AND/OR EXAMINATIONS FORM**

PARENT OR LEGAL GUARDIAN - COMPLETE THIS SECTION

Note: This form is required for all students entering kindergarten, sixth or ninth grades when parent(s) or legal guardian(s) is requesting a religious exemption on or after October 16, 2015. This form also must be submitted to request religious exemption for any student enrolling to enter any public, charter, private or parochial preschool, kindergarten, elementary or secondary school on or after October 16, 2015.

This form may NOT be used for personal or philosophical reasons. Illinois law does not allow for such exemptions.

Student Name (last, first, middle)	Student Date of Birth: Month Day Year	School Name:	Grade: _____
Parent/Guardian Name:	Gender: <input type="checkbox"/> M <input type="checkbox"/> F	City: _____	
Address:	Telephone Number(s)	Exemption requested for (mark all that apply): <input type="checkbox"/> Hepatitis B <input type="checkbox"/> DTaP <input type="checkbox"/> Polio <input type="checkbox"/> Hib <input type="checkbox"/> Pneumococcal <input type="checkbox"/> MMR <input type="checkbox"/> Varicella <input type="checkbox"/> Td/Tdap <input type="checkbox"/> Meningococcal <input type="checkbox"/> Health Exam <input type="checkbox"/> Eye Exam <input type="checkbox"/> Dental Exam <input type="checkbox"/> Vision/Hearing Tests <input type="checkbox"/> Other (indicate below)	

To receive an exemption to vaccination/examination, a parent or legal guardian must provide a statement detailing the religious beliefs that prevent the child from receiving each required school vaccinations/examination being requested. In the space provided below, state each vaccination or examination exemption requested and state the religious grounds for each request. If additional space is needed, attach additional page(s).

Religious Exemption Notice:

No student is required to have an immunization/examination that is contrary to the religious beliefs of his/her parent or legal guardian. However, not following vaccination recommendations may endanger the health or life of the unvaccinated student, others with whom they come in contact, and individuals in the community. In a disease outbreak, or after exposure to any of the diseases for which immunization is required, schools may exclude children who are not vaccinated in order to protect all students.

I have read the Religious Exemption Notice (above) and have provided requested information for each vaccination/examination being requested for religious exemption.

Signature of parent or legal guardian (required)

Date

HEALTH CARE PROVIDER* – COMPLETE THIS SECTION

Provision of information: I have provided the parent or legal guardian of the student named above, with information regarding 1) the required examinations, 2) the benefits of immunization, and 3) the health risks to the student and to the community from the communicable diseases for which immunization is required in Illinois. I understand that my signature only reflects that this information was provided; I am not affirming the parent or legal guardian's religious beliefs regarding any examination, immunization or immunizing agent.

Signature of health care provider*

Date: _____
(Must be within 1 year prior to school entry)

Health Care Provider Name:

Address:

Telephone #: _____

*Health care provider responsible for performing child's health examination includes physicians licensed to practice medicine in all of its branches, advanced practice nurses, or physician assistants.

Religious Exemption Form



Q. We've had a problem with getting some doctors to sign the religious objection form; what to do?

- First, try to speak to the clinic physician or APN and explain what the law does and does not do.
- If a district enrolls a student without a properly completed religious objection waiver request form, the student is non-compliant and that number is reported as such on IWAS.
- Schools “shall exclude” and if they do not, the compliance rate may fall under 90% for the district.

Questions About this Form

- Does the form need to be signed by the same provider who completes the school physical?
- My local walk-in clinics/urgent care centers will do school physicals, but some providers do not want to sign the exemption form because they are not the child's primary care provider.
- Can the form be signed by a provider outside of Illinois?
- I have an out-of-state transfer student who had a sixth grade physical at a walk-in clinic. The provider would not sign the form because they have no history on the child, and will not be the PCP. The parent wants to fax the form to their previous provider, who is in another state, to complete it. I wasn't sure if that was allowed.

Regional Contacts for Proof of Immunity Reviews

**All Documentation Submitted MUST be
Accompanied by Parental Permission**



1 ROCKFORD REGION
Patricia Dashney
4302 N. Main St.
Rockford, IL 61103
815-987-7866
Fax 815-987-7822
E-mail: patricia_dashney@illinois.gov

2 PEORIA REGION
Chris Morrow
5415 N University St.
Peoria, IL 61614
309-693-5630
Fax 309-693-5118
E-mail: Christopher.morrow@illinois.gov

4 EDWARDSVILLE REGION
Marla Jentsch
22 Kettle River Dr.
Glen Carbon, IL 62034
618-656-6680
Fax 618-656-5863
E-mail: marla.jentsch@illinois.gov

5 MARION REGION
Sally Rebbe
525 W. Jefferson St.
Springfield, IL 62761
217-785-1455
Fax 217-524-0987
E-mail: sally.rebbe@illinois.gov

6 CHAMPAIGN REGION
Debbie Reynolds
2125 S. First St.
Champaign, IL 61820
217-278-5900
Fax 217-278-5959
E-mail: debbie.reynolds@illinois.gov

7 WEST CHICAGO REGION
Janet Daniels
245 W. Roosevelt Road, Bldg #5
West Chicago, IL 60185
630-293-6800
Fax 630-293-6908
E-mail: janet.daniels@illinois.gov

8 CHICAGO/COOK CO REGION
See Attached Breakout
(Page 2) Of Schools
By City of Location
Send Parent-consented data to the
IDPH Representative identified.

If you have questions concerning
immunizations, please call 800-526-4372
TTY (hearing impaired use only) 800-547-0466
www.idph.state.il.us and
<http://www.dph.illinois.gov>

IDPH Contacts for Proof of Immunity Reviews – Please Contact IDPH REP Below for Your School/District based on City of Location

Northwest Cook

Districts / Schools within
Arlington Heights
Barrington
Barrington Hills
Bartlett
Buffalo Grove
Deer Park
DesPlaines
Elk Grove Village
Hanover Park
Hoffman Estates
Inverness
Mt. Prospect
Palatine
Park Ridge
Prospect Heights
Rolling Meadows
Schaumburg
Streamwood
Wheeling
CONTACT: Patricia Dashney 4302 N. Main St. Rockford, IL 61103 815-987-7866 Fax: 815.987-7822 patricia.dashney@illinois.gov

Northeast Cook

Districts / Schools within
Deerfield
Evanston
Glencoe
Glenview
Kenilworth
Lincolnwood
Morton Grove
Niles
Northbrook
Northfield
Skokie
Wilmette
Winnetka
<p>CONTACT: Janet Daniels 245 W. Roosevelt Rd West Chicago, IL 60185 630-293-6862 Fax: 630-293-6908 Email: janet.daniels@illinois.gov</p>

Central Cook

Districts / School within	
Bedford Park	Lemont
Bellwood	Lyons
Berwyn	Maywood
Bridgeview	McCook
Broadview	Melrose Park
Brookfield	Norridge
Burbank	North Riverside
Burr Ridge	Northlake
Cicero	Oak Park
Countryside	River Forest
Elmwood Park	River Grove
Forest Park	Riverside
Forest View	Schiller Park
Franklin Park	Stickney
Harwood Heights	Stone Park
Hillside	Summit
Hodgkins	Summit Argo
Indian Head Park	Westchester
Justice	Western Springs
LaGrange	Willow Springs
LaGrange Park	

CONTACT: Janet Daniels
 245 W. Roosevelt Rd
 West Chicago, IL 60185
 630-293-6862
 Fax: 630-293-6908
 Email: janet.daniels@illinois.gov

Southern Cook

Districts / School within	
Alsip	Merrionette Park
Blue Island	Midlothian
Burnham	Oak Forest
Calumet City	Oak Lawn
Calumet Park	Olympia Fields
Chicago Heights	Orland Hills
Chicago Ridge	Orland Park
Country Club Hills	Palos Heights
Crestwood	Palos Hills
Dixmoor	Palos Park
Dolton	Park Forest
East Hazel Crest	Posen
Evergreen Park	Richton Park
Flossmor	Riverdale
Ford Heights	Robbins
Harvey	Sauk Village
Hazel Crest	S. Chicago Hts.
Hickory Hills	South Holland
Hometown	Steger
Homewood	Thornton
Lansing	Tinley Park
Markham	University Park
Matteson	Worth

CONTACT: Quentin Smith
4212 W. St. Charles Road
Bellwood, IL 62761
708-544-5300 / Fax: 708-544-5830
Email: quentin.smith@illinois.gov



I-CARE



Illinois Comprehensive Automated Immunization Registry Exchange

- School employees can access immunization records from the State Immunization Registry, I-CARE.
- Allows view and printing of child immunization records in your jurisdiction.
- Must register for I-CARE by completing the memorandum of agreement then going on line to sign on through the web portal
- “Data-mining” or third party access is prohibited.
- To register for I-CARE either email dph.icare@illinois.gov or call **800-526-4372**



Valid Certificate of Child Health Exams

What health exam forms can be submitted and accepted for school year 2016-2017?



- The 02/13 and 11/15 versions and other electronically generated forms approved after 2/13 are the versions that can be accepted for 2016-2017.
- After January 1, 2017 only forms approved after 11/1/15 are acceptable.
- Some electronic forms have been approved for use and a statement denoting that approval will appear on the form. These forms will closely resemble the State mandated form. The approved form will include the statement “Approved SHP (date of approval)”.



State of Illinois
Certificate of Child Health Examination

NEW FORM Established 11/2015

Student's Name Last First Middle				Birth Date Month/Day/Year		Sex	Race/Ethnicity	School /Grade Level/ID#		
Address Street City Zip Code				Parent/Guardian		Telephone # Home Work				
IMMUNIZATIONS: To be completed by health care provider. The mo/da/yr for <u>every</u> dose administered is required. If a specific vaccine is medically contraindicated, a separate written statement must be attached by the health care provider responsible for completing the health examination explaining the medical reason for the contraindication.										
REQUIRED Vaccine / Dose	DOSE 1 MO DA YR		DOSE 2 MO DA YR		DOSE 3 MO DA YR		DOSE 4 MO DA YR		DOSE 5 MO DA YR	
DTP or DTaP										
Tdap, Td or Pediatric DT (Check specific type)	<input type="checkbox"/> Tdap <input type="checkbox"/> Td <input type="checkbox"/> DT		<input type="checkbox"/> Tdap <input type="checkbox"/> Td <input type="checkbox"/> DT		<input type="checkbox"/> Tdap <input type="checkbox"/> Td <input type="checkbox"/> DT		<input type="checkbox"/> Tdap <input type="checkbox"/> Td <input type="checkbox"/> DT		<input type="checkbox"/> Tdap <input type="checkbox"/> Td <input type="checkbox"/> DT	
Polio (Check specific type)	<input type="checkbox"/> IPV <input type="checkbox"/> OPV		<input type="checkbox"/> IPV <input type="checkbox"/> OPV		<input type="checkbox"/> IPV <input type="checkbox"/> OPV		<input type="checkbox"/> IPV <input type="checkbox"/> OPV		<input type="checkbox"/> IPV <input type="checkbox"/> OPV	
Hib Haemophilus influenza type b										
Pneumococcal Conjugate										
Hepatitis B										
MMR Menstr. Mumps, Rubella										
Varicella (Chickenpox)										
Meningococcal conjugate (MCV4)										
RECOMMENDED, BUT NOT REQUIRED Vaccine / Dose										
Hepatitis A										
HPV										
Influenza										
Other: Specify Immunization Administered/Dates										
Health care provider (MD, DO, APN, PA, school health professional, health official) verifying above immunization history must sign below. If adding dates to the above immunization history section, put your initials by date(s) and sign here.										
Signature				Title		Date				
Signature				Title		Date				
ALTERNATIVE PROOF OF IMMUNITY 1. Clinical diagnosis (measles, mumps, hepatitis B) is allowed when verified by physician and supported with lab confirmation. Attach copy of lab result. *MEASLES (Rubella) MO DA YR **MUMPS MO DA YR HEPATITIS B MO DA YR VARICELLA MO DA YR 2. History of varicella (chickenpox) disease is acceptable if verified by health care provider, school health professional or health official. Person signing below verifies that the parent/guardian's description of varicella disease history is indicative of past infection and is accepting such history as documentation of disease. Date of Disease Signature Title 3. Laboratory Evidence of Immunity (check one) <input type="checkbox"/> Measles* <input type="checkbox"/> Mumps** <input type="checkbox"/> Rubella <input type="checkbox"/> Varicella Attach copy of lab result. *All measles cases diagnosed on or after July 1, 2002, must be confirmed by laboratory evidence. **All mumps cases diagnosed on or after July 1, 2013, must be confirmed by laboratory evidence. Completion of Alternatives 1 or 3 MUST be accompanied by Labs & Physician Signature: _____ Physician Statements of Immunity MUST be submitted to IDPH for review.										

Certificates of Religious Exemption to Immunizations or Physician Medical Statements of Medical Contraindication Are Reviewed and Maintained by the School Authority.

Last First Middle		Birth Date Month/Day/Year		Sex	School	Grade Level/ID#	
HEALTH HISTORY TO BE COMPLETED AND SIGNED BY PARENT/GUARDIAN AND VERIFIED BY HEALTH CARE PROVIDER							
ALLERGIES (Food, drug, insect, other)		List		MEDICATION (Prescribed or over-the-counter)		List	
Diagnoses of asthma?		Yes No		Loss of function of one or more organs (eyes/nose/throat/teeth)		Yes No	
Child wakes during night coughing?		Yes No		Hypertension?		Yes No	
Birth defects?		Yes No		When? What for?		Yes No	
Developmental delay?		Yes No		Surgery? (List all)		Yes No	
Blood disorders? Hemophilia, Sickle Cell, Other? Explain.		Yes No		When? What for?		Yes No	
Diabetes?		Yes No		Sustained injury or illness?		Yes No	
Head injury/Concussion/Fallen out?		Yes No		TB skin test positive (past/present)?		Yes* No* *If yes, refer to health official for treatment.	
Seizures? What are they like?		Yes No		TB disease (past or present)?		Yes* No* *If yes, refer to health official for treatment.	
Heart problems/Shortness of breath?		Yes No		Tobacco use (type, frequency)?		Yes No	
Heart murmur/High blood pressure?		Yes No		Alcohol/Drug use?		Yes No	
Dizziness or drowsiness with exercise?		Yes No		Family history of sudden cardiac death (age 30)? (Cause)?		Yes No	
Type/Vision problems? Glasses? Contacts? Last exam by eye doctor? Other concerns? (astigmatism, cataracts, etc., astigmatism, difficulty reading)		Yes No		Dental? (Frequency) Bridge? (Date)		Yes No	
Ear/hearing problems?		Yes No		Adolescent may be denied all appropriate services for health and educational purposes.		Parent/Guardian Signature Date	
Bone/joint problems (injury/condition)?		Yes No					
PHYSICAL EXAMINATION REQUIREMENTS: Entire section below to be completed by MD/DO/APN/PA HEAD CIRCUMFERENCE # < 3.5 years old WEIGHT BMI BMI PERCENTILE BOP							
DIABETES SCREENING (not required for day care) BMI ≥ 35 kg/m² age 10 Yes <input type="checkbox"/> No <input type="checkbox"/> And any two of the following: Family History Yes <input type="checkbox"/> No <input type="checkbox"/> Ethnic Minority Yes <input type="checkbox"/> No <input type="checkbox"/> Signs of Insulin Resistance (hypernatremia, dyslipidemia, polycystic ovaries/peduncles, acanthosis nigricans) Yes <input type="checkbox"/> No <input type="checkbox"/> At Risk Yes <input type="checkbox"/> No <input type="checkbox"/>							
LEAD RISK QUESTIONNAIRE: Required for children age 6 months through 6 years enrolled in licensed or public school operated day care, preschool, nursery school and/or kindergarten. (Blood test required if resides in Chicago or high risk zip code.) Questionnaire Administered? Yes <input type="checkbox"/> No <input type="checkbox"/> Blood Test Indicated? Yes <input type="checkbox"/> No <input type="checkbox"/> Blood Test Date Result							
SKIN OR BLOOD TEST Recommended only for children in high-risk groups including children immunosuppressed due to HIV infection or other conditions, frequent travel to or born in high prevalence countries or those exposed to adults in high-risk categories. See CDC guidelines. http://www.cdc.gov/ncidod/diseases/tb/101_questions.html No test needed <input type="checkbox"/> Test performed <input type="checkbox"/> Skin Test: Date Read Result: Positive <input type="checkbox"/> Negative <input type="checkbox"/> mm _____ Blood Test: Date Reported Result: Positive <input type="checkbox"/> Negative <input type="checkbox"/> Value _____							
LAB TESTS (Recommended)		Date		Results		Date	
Hemoglobin or Hematocrit						Sickle Cell (when indicated)	
Urea Nitrogen						Developmental Screening Test	
SYSTEM REVIEW		Normal		Comments/Follow-up/Needs		Normal	
Skins						Endocrine	
Ears		Screening Result:				Gastrointestinal	
Eyes		Screening Result:				Genito-Urinary	
Nose						Neurological	
Throat						Musculoskeletal	
Mouth/Dental						Spinal Exam	
Cardiovascular/HTN						Nutritional status	
Respiratory				<input type="checkbox"/> Diagnosis of Asthma		Mental Health	
Currently Prescribed Asthma Medication:						Other	
<input type="checkbox"/> Quick-relief medication (e.g. Short Acting Beta Agonist)							
<input type="checkbox"/> Controller medication (e.g. inhaled corticosteroid)							
NEEDS/MODIFICATIONS: (required in the school setting)						DIETARY Needs/Restrictions	
SPECIAL INSTRUCTIONS/DEVICES e.g. safety glasses, glass eye, short protector for orthodontia, pacemaker, prosthetic device, dental bridge, bite tooth, athletic support/guard							
MENTAL HEALTH/OTHER: Is there anything else the school should know about this student? If you would like to discuss this student's health with school health personnel, check this: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, please describe: _____							
EMERGENCY ACTION needed while at school due to child's health condition (e.g., asthma, seizure, insect sting, food/poison allergy, bleeding problem, diabetes, etc.) Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please describe: _____							
On the basis of the information on this day, I approve this child's participation in: <input type="checkbox"/> Yes <input type="checkbox"/> Modified <input type="checkbox"/> No <input type="checkbox"/> Modified <input type="checkbox"/>							
PHYSICAL EDUCATION Yes <input type="checkbox"/> No <input type="checkbox"/> Modified <input type="checkbox"/> INTER-SCHOOL/OLYMPIC SPORTS Yes <input type="checkbox"/> No <input type="checkbox"/> Modified <input type="checkbox"/>							
Print Name (MD/DO, APN, PA)		Signature				Date	
Address						Phone	



WHO TO CONTACT

General questions regarding requirements in the School Code and school audits:

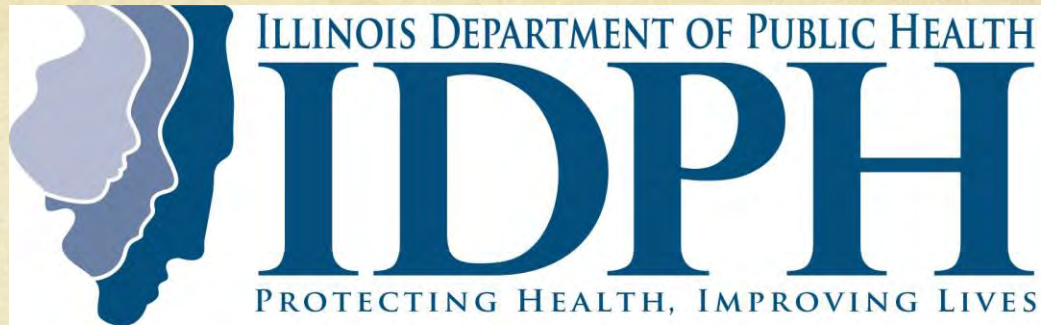
Jessica Gerdes, ISBE,
312-814-5560; JGerdes@isbe.net

General health requirements and child health exams or approved forms:

Vyki Jackson, IDPH, 217/524-1844; victoria.jackson@illinois.gov



Specific immunization requirements and medical exemptions:
IDPH-Immunization Program 217/785-1455 or refer to the IDPH Regional Contact List.



THANK YOU

JANET.DANIELS @ILLINOIS.GOV

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www.dph.illinois.gov

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Frequently Asked Questions



Q. Who is responsible for reviewing physician immunization notes?

- Physician notes which state that a child is “adequately immunized,” or which indicate “no additional vaccine is needed,” **must** be sent to regional IDPH Immunization Program staff. See contact information at http://www.isbe.net/school_health.htm?col12=open#CollapsiblePanel12
- The IDPH rules and regulations **do not** acknowledge the “4-day grace period” that some providers wish to apply. When physicians administer vaccinations “off schedule,” they will need to submit notes outlining these circumstances that must then be submitted to IDPH for review.
- During the time physician notes are under review by IDPH staff, students will be considered “in compliance, but unprotected.”

Q. Where is the requirement for a 10-year Td booster?

- Another change to Section 665.240a was the removal of the requirement that stated:
“If 10 years have elapsed since the last booster, an additional Td or Tdap booster is required.”

The reasoning regarding the removal of this requirement was since students were going to be required to show proof of a dose of Tdap (6th-12th grade), there was not a need to have the 10 year requirement in the Child Health Examination Code. Receipt of the Tetanus Toxoid (TT) vaccine is not acceptable in fulfilling this requirement.

Q. If a non-immunized child is excluded from school because of a measles outbreak, does the school district have to provide homebound tutoring?

- If the child is unprotected and must be excluded per a state or local health department requirement, a physician may write, and the school may consider, a request for homebound instruction. Check with your special education director.

Q. What if the student's physician does not want to give either the Tdap or Meningococcal vaccine until age 11?

- A student would be considered in compliance with the immunization requirements if a signed statement from a health care provider is presented indicating when these immunizations will be administered within the current school year that they turn 11 years of age. If a student is delinquent for the scheduled appointment, that student is no longer considered to be in compliance.

Q. Is it acceptable to attach an immunization record and state on immunization section of the form to “see attached immunization history documentation”?

- Yes, if there is a notation in the immunization section of the form that refers to the attached documentation. The attached immunization record must be signed and dated by the health care provider or local health department employee who provided the information.

Q. What is considered alternative proof of immunity?

- Alternative proof of immunity would include a health care provider diagnosed history of varicella and mumps, or laboratory evidence of immunity.
- Laboratory evidence of immunity:
 - + IgG or titers accepted for measles, rubella, mumps and varicella
 - Hepatitis B infection: HBsAg, anti-HBc and/or anti-HBs
- Lab evidence of immunity is not allowed for Hib, pneumococcal, diphtheria, tetanus, pertussis, polio, or meningococcal vaccines.

Q. Who can sign the Immunization History portion of the Certificate of Child Health Examination form?

- The immunization history portion of the form can be signed by a physician, nurse in a physician's office, school nurse, record keeper in the school, local health agency, etc. The verification date must be included. A local health department stamp is acceptable for verifying the immunization history portion of the health form. The verification date must be included.

Q. Can a nurse practitioner or physician's assistant perform a school physical and sign the Child Health Examination form?

- Yes. Section 27-8.1 in the School Code of Illinois allows advanced practice nurses (APNs) and physician assistants (PAs) who perform a health examination to sign the health exam form.

Q. Can a chiropractor perform a school physical and sign the Child Health Examination form?

- No. Neither the School Code nor the Child Health Examination Code authorize a chiropractor to perform a school physical or sign the form. Physicians licensed to practice medicine in all of its branches, advanced practice nurses who have a written collaborative agreement with a physician which authorizes them to perform health examinations, or physician assistants who have been delegated the performance of health examinations by their supervising physician shall be responsible for the performance of the health examination and shall sign all school health examination report forms.

Q. If a person other than an APN or PA has sign-off authority from the physician, can they sign the physician's name and then their name on the health examination form?

- No.** Section 27-8.1 in the School Code of Illinois states if anyone other than a physician, APN, or PA performs any part of a health examination, then a physician must review and sign all required forms.

Q. If the “Certificate of Child Health Examination” form has a physician stamp instead of an actual signature, is this acceptable?

Yes, a physician signature stamp may be used. A stamp only listing the clinic name and address is not sufficient.

Q. Do students need to have a TB skin test?

- IDPH rules (77 Illinois Administrative Code) do not require initial or routine skin testing of school children for TB. However, the local health department, TB board, or IDPH may, after considering community factors, institute routine, periodic testing when a community, school, or school district has a higher than expected prevalence of infection.

The TB Control Program recommends that children be assessed individually and skin tested by the Mantoux method if they are:

- in a high-risk group, such as children who are immunosuppressed due to HIV infection or other conditions;
- recent immigrants from high prevalence countries (see CDC Travelers Health Yellow Book on website); or
- exposed to adults in high-risk categories (see CDC guidelines).

Q. Is lead screening required?

- Yes, for some student populations. Per 77 Illinois Administrative Code 665 (Child Health Examination Code), lead screening is a required part of the health examination for children age six years or younger prior to admission to kindergarten or first grade.
- The health care provider must complete the section of the Certificate of Child Health Examination indicating that the child has been evaluated using the Childhood Lead Risk Questionnaire if the child resides in an area defined as low risk by the Department (IDPH), or has been blood lead tested for lead poisoning if the child resides in an area defined as high risk (Section 7.1 of the Lead Poisoning Prevention Act).
- The IDPH Lead Poisoning Prevention Code and Childhood Lead Risk Questionnaire may be found on the IDPH website, www.dph.illinois.gov. Questions should be addressed to the IDPH, Lead Program at (217) 557-4519.

Q. What is expected for completion of the lead section on the health exam form?

1. Completion of the section:

"Blood Test Indicated? Yes or No."

If the lead section of the form is not completed by the child's health care provider, a nurse can administer the questionnaire and mark that section "yes" or "no," inform the parent of the need for the blood test if indicated, and note the date of the referral on the form.

2. There is no requirement that the school obtain the actual blood test results.
3. If the lead section of the health examination is not completed by the health care provider or nurse, the form is incomplete and cannot be accepted for school enrollment.

Q. Is diabetes risk assessment a required component of the physical examination?

- Yes. Public Act 93-0530 requires that diabetes screening shall be completed as a required part of each mandated health examination. The Consensus Panel of the American Diabetes Association (ADA) suggests that if an individual is overweight and has any two of the risk factors listed below, they are at risk of developing type 2 diabetes. **Overweight** in children is defined as **BMI > 85th percentile** for age and sex.
- **Risk Factors:**
 - Family history of type 2 diabetes in first/second-degree relatives.
 - Belonging to a certain racial/ethnic groups, including American Indians, African-Americans, Hispanic Americans, Asian/South Pacific Islanders.
 - Showing signs of insulin resistance or conditions associated with insulin resistance including: acanthosis nigricans, hypertension, dyslipidemia, polycystic ovarian syndrome.
- Results of the diabetes risk assessment must be documented on the Certificate of Child Health Examination form. Questions about the diabetes risk assessment should be directed to Vyki Jackson, (217) 524-1844 or victoria.jackson@illinois.gov.

Q. If the parent does not complete the health history section of the form, can I ask them to complete one and attach it to the physical?

- Yes, a health history can be completed, dated, and signed by the parent and attached to the physical examination form.

Q. What types of “out-of-state” physical exam forms are acceptable?

- Out-of-state forms are accepted only for students transferring into Illinois schools *for the first time*. The exam must have been completed within one year prior to the date of entry into an Illinois school and must cover all “required” elements as listed on the Certificate of Child Health Examination form. See 77 Illinois Administrative Code 665.150(b) (Child Health Examination Code) at:
<http://www.ilga.gov/commission/jcar/admincode/077/07700665sections.html>

Q. What does “enrolling for the first time” mean?

- A student who transfers into Illinois schools from out-of-state “for the first time” may be a student who moved to Illinois from another state or country, never before having been enrolled in an Illinois school. If that student then moved back to the same state or country, or to a different state or country, and then returned to an Illinois school, then that student is not entering an Illinois school for the first time and therefore would not need a new examination report (unless they are entering a grade level for which a new physical is required). In that case, they can no longer use the out of state form, although they can see an out-of-state physician.

Q. Can I still accept physicals documented on the prior 01-13 version of the form?

- Yes, for the start of the 2016-2017 school year. The new 11-15 version will be required starting January 1, 2017, and must be used for the 2017-2018 school year. The Child Health Examination Code requires that all mandated school physicals “shall be reported on the uniform forms that the Department of Public Health and the Illinois State Board of Education prescribe for statewide use.”
- Some electronic forms have been approved for use and a statement denoting that approval will appear on the form. These forms will closely resemble the state mandated form. The approved forms will include the statement “Approved IDPH SHP (date of approval).”
- If you have additional questions about the appropriate form, contact Vyki Jackson at (217) 524-1844 for further assistance.

Q. What about sports physicals?

- IHSA /IESA only state in their rules, and ISBE repeats in our rules, that the athlete must have a physical before practice or play, and the physical must be documented and must be held no earlier than 395 days prior to the day of practice or play (and presumably, any day of practice or play). There is no word on what has to be on the document; the IHSA / IESA physical exam form is offered as a sample. Ask your AD, or contact IHSA for their take on it. Neither IDPH nor ISBE rules about what constitutes the valid form or content.
- Sports physicals last for 395 days - the year of school and the post-season

Q. Can a school the student is transferring from refuse to send a copy of the health record to a new school if there are outstanding fees?

- No. The Illinois School Student Records Act requires health records to be transferred to the new school or a legible copy provided to the parents. (The current district also must maintain either original or legible copy.) A certified copy of the remaining student records can be held for other reasons. (See ISBE rule 1.765, Student Records)
- While awaiting copies, obtain from the previous school the Illinois School Transfer Form, ISBE 33-78.
- http://www.isbe.net/forms_numerical1.htm



This file includes fillable form fields.
You can print the completed form and save it to your device or Acrobat.com.

out of the school district to verify whether or not the student is "in good standing" and, whether or not their medical records are up-to-date and complete as defined in Section 2-3.13a. "In good standing" means that the student is not being disciplined by an administrator for suspension or expulsion, and is entitled to attend classes, as of the date of this form. No public school district is required to accept a student unless they can produce this form from the student's previous Illinois public school district. **This form is not to be sent to the Illinois State Board of Education. It is to be sent directly to the student's new school they will be attending.**

NAME OF STUDENT (Last, First, Middle)

BIRTHDATE (Month, Day, Year)

GENDER

☐ Male☐ Female

GRADE

ADDRESS OF STUDENT (Street, City, State, Zip Code)

NAME OF PARENT OR GUARDIAN

PARENT/GUARDIAN TELEPHONE (Include Area Code)

Home

Work

ADDRESS OF PARENT OR GUARDIAN (Street, City, State, Zip Code)

DISTRICT NAME AND NUMBER TRANSFERRING TO

NEW DISTRICT ADDRESS (Street, City, State, Zip Code)

NAME OF SCHOOL STUDENT WILL BE TRANSFERRING TO

NAME OF PRINCIPAL AT NEW SCHOOL

Please check (✓) the appropriate box.

☐

I hereby attest that the above student is "in good standing" and that all medical records for the above student are up-to-date and complete as of the date of this form.

☐

The above student's medical records are **not** up-to-date and complete as documented in the student's permanent medical records.

☐

I hereby attest that the above student is **not** "in good standing" due to a current suspension and/or expulsion from _____ until _____; but

Q. Is an out-of-state transfer student given additional time to provide health records?

- If the student is an out-of-state transfer student and does not have the proof required under subsection (5) before October 15 of the current year, or whatever date is set by the school district, then he or she may only attend classes if he or she has proof that an appointment for the required vaccinations has been scheduled with a party authorized to submit proof of the required vaccinations. If the proof of vaccination required under this subsection (5) is not submitted within 30 days after the student is permitted to attend classes, then the student is not to be permitted to attend classes until proof of the vaccinations has been properly submitted.
- Note that the law permitting out-of-state students additional time does not include the words “physical examination.” With this exemption not specifically recorded in state law or rule, schools may require the exam prior to entry while the immunizations can wait 30 days (with proof of appointment within those 30 days).

Q. Is a child required to be excluded or is it up to the school if they do not have their health records by due date?

- If a child does not comply by October 15 of the current school year, or by an earlier date established by a school district, with **all** of the physical examination and immunization requirements, then the local school authority *shall* exclude that child from school until such time as the child presents proof of having had the **health examination as required** and presents proof of having received those required immunizations which are medically possible to receive.
- To establish a date before October 15 of the current school year, a school district must give notice of the requirements of Section 27-8.1 of the School Code 60 days prior to the earlier established date.

Q. May a student in special education be excluded from school for noncompliance with health examination and immunization requirements?

- Yes. The requirements for health examinations and immunizations apply to all children except those who have been granted an exemption due to religious convictions or medical concerns. If an exemption has not been sought and granted, the district shall exclude a special education student in the same manner as a general education student.

Q. If a child receiving special education services is excluded, does the school have to provide homebound tutoring?

- A district would only have to provide homebound tutoring to a child enrolled in special education who is excluded if they extended that service to a child enrolled in general education. ISBE reimbursement is not assured without medical statement of need.

Q. How do we handle vaccinations and physicals for homeless students?

- McKinney-Vento Homeless Education Act and the recently enacted Every Student Succeeds Act, both federal legislation, require schools to enroll homeless students immediately, provide support to homeless children, and work on obtaining the physicals and immunizations (records or vaccinations)
- Beginning with enrollment, work to “remedy the barriers” that have prevented them from obtaining vaccinations and physical exams
- Exemption is not permanent; hold a meeting with administration and parent/guardian, or legal representative. Document all attempts to remove barriers, and document results.
- Document every piece of communication, every meeting, every action to remove barriers!

Q. If a student attends only part time classes, such as otherwise homeschooled, do they need the same health requirements?

- Yes. If a student is enrolled, whether for one class or all classes, they are an enrolled student and need to meet the same requirements as full time students.
- Similar requirements for students attending a part time preschool, lab school, coming in for speech services, etc.
- The only exceptions are visitors.

Q. What about foreign exchange students?

- All students who are enrolled are to meet the vaccination and health examination requirements, including foreign exchange students.
- Treat those physical exam forms similar to other “out of state/out of country” forms.
- All with a “welcoming” attitude

Q. What about foster students?

- Illinois DCFS has instituted measures that make it easier for foster parents to have the student's medical records, including school health recodes, upon transfer to the foster family.
- In some circumstances, the records may not be immediately available; if necessary, treat those students as homeless until the situation improves.
- Foster students who have been with a family for more than temporary, immediate care should be treated as children of the family as far as health requirements go.

Q. Who is responsible for maintaining the Health Examination and vaccine records for students attending special out-of-district classes?

- Both districts. The original should be maintained by the child's home district (district of residence). A copy should be kept by the school where the child attends out-of-district classes. Questions should be directed to the ISBE Division of Special Education, or Data Analysis for reporting purposes.

State Reports: due to IDPH

- Vision screening (annually, by June 30)
- Hearing screening (annually, by June 30)
- Link to forms for vision and hearing screening-

<http://dph.illinois.gov/topics-services/prevention-wellness/vision-hearing#forms-forms-vision-hearing>

Q. What are the mandated grades/age for vision and hearing screening?

- Vision and hearing screenings are required annually beginning at age 3 in all licensed daycare/preschool programs. Once a child begins school, vision screening is required at grades K, 2 and 8. Hearing screening is required at grades K, 1, 2, and 3.
- Screening for both vision and hearing must be completed annually on ALL children in special education, children new to the district, and teacher referrals.
- Screening performed by the doctor's office as part of the school physical *does not* fulfill the mandate. If there is documentation in the child's file of an eye examination having been completed by an optometrist or ophthalmologist within the last 12 months, the child does not have to be screened.

Mandatory Disease Reports

- Mandate upon health care providers on “reportable diseases”
 - Centers for Disease Control and Prevention (CDC) regulations to state health departments
 - State health departments to health care providers
 - Downloadable posters produced by Illinois Department of Public Health (IDPH):
<http://www.idph.state.il.us/health/infect/ReportDiseaseLab.pdf>
 - No names, initials, or other identification may be released outside of school without written parental release, with few exceptions
 - Diseases noted to be reported “immediately” (within three hours) and “within three days” are exempt from FERPA requirement for written parental permission under the public health emergency exemption (by agreement between ISBE and IDPH)

Records Maintenance

- Family Educational Rights and Privacy Act (FERPA) and Illinois School Students Records Act (ISSRA), along with ISBE rule 1.375 (Student Records), form the basis of student record keeping.
- Prohibitions on sharing student records, including health records, outside of school staff
- State Education Agency access allowed for regulatory monitoring
- Permanent record: health records - those required to demonstrate enrollment eligibility or waiver; immunizations, physical, dental exam, eye exam
- Temporary record: health-related records - essentially, all others except for personal notes, memory aids, temporary “sticky notes,” etc.
- Permanent records are to be maintained for 60 years after student leaves your school or district. Temporary records: five years after student leaves

Q. When a school transfers a record to another school, should they keep the original record or keep a copy?

- It is recommended that the original stay with or follow the student's school attendance location, and the previous school keep a legible copy for the required duration.

Reports Due to ISBE

- Data on student immunizations, per grade, per year, per student (November of each year)
- Data on student physical examinations (November of each year)
- Data on eye examination completions (November of each year)
- Data on dental examination completions (May of each year)
- All entered into IWAS

Q. Is a dental examination required?

- Yes. Before May 15 of the school year, each child in kindergarten and the second and sixth grades shall present to the school proof of having been examined by a dentist in accordance with Section 27-8.1(1.5) of the School Code.
- A waiver form is available for parents who cannot complete the dental exam.
- The form and waivers are available on IDPH website at www.idph.state.il.us or the ISBE website: http://www.isbe.net/school_health.htm

Q. Can a child be excluded because of failure to obtain the dental exam?

- No. If a child in the second or sixth grade fails to present proof of having been examined by a dentist by May 15, the school may hold the child's report card until one of the following occurs:
- 1) The child presents proof of a completed dental examination. (Section 27-8.1(1.5) of the School Code) Submission of a completed examination form, in accordance with subsection (b), constitutes proof of a completed dental examination;
- 2) The child presents proof that a dental examination will take place within 60 days after May 15. (Section 27-8.1(1.5) of the School Code) A written statement or appointment card, prepared by a dentist, dental hygienist, or his or her designee, and signed by the child's parent or guardian, indicating the name of the child and the date and time of the scheduled dental examination, constitutes proof that a dental examination will take place. The child must present proof of a completed dental examination at the beginning of the following school year; or,
- 3) The child presents a dental examination waiver form, in accordance with Section 665.450.

Q. Which students are required to have an eye *examination*?

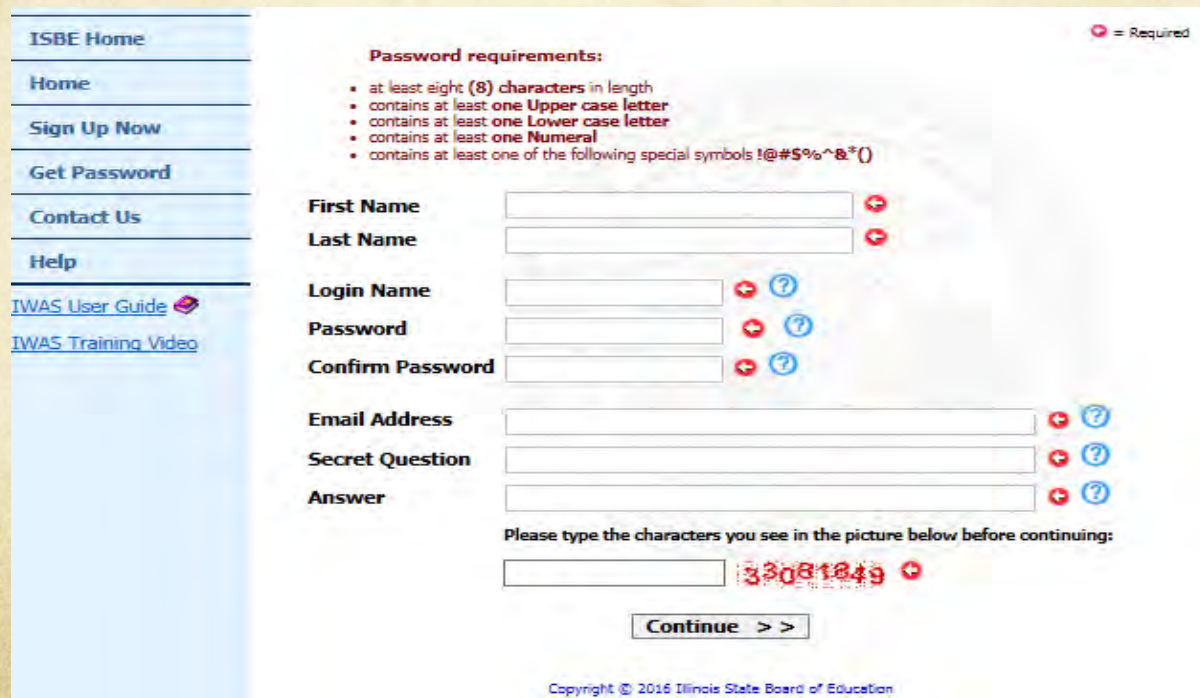
- Any child entering the Illinois school system at the kindergarten level or higher for the first time is required to have the eye examination regardless of grade level. If a child transfers in from another school in Illinois, it would not be first entry into the Illinois school system. If they transfer in from out-of-state, out-of-country, or from home schooling, and have never before been in the Illinois school system, the eye examination would be required.

Q. What if the doctor just signs a blank eye exam for a kindergartner with a note saying that the eye doctor does not feel it is necessary unless health history indicates a problem.

- The parent will need to find another doctor. Any physician who is trained in eye exams or optometrist is acceptable.

How do we get an IWAS account?

You can sign up for an account by visiting the ISBE website www.isbe.net; double clicking on “IWAS”; single clicking on [“Sign Up Now”](http://www.isbe.net/iwas/asp/sign_up.asp) which leads you to the page below https://sec1.isbe.net/iwas/asp/sign_up.asp.



The screenshot shows the 'Sign Up' page for the IWAS system. On the left is a blue sidebar with navigation links: ISBE Home, Home, Sign Up Now, Get Password, Contact Us, Help, IWAS User Guide, and IWAS Training Video. The main content area has a white background. At the top right, a legend indicates that a red asterisk (*) means 'Required'. Below this, 'Password requirements' are listed: at least eight (8) characters in length, at least one upper case letter, at least one lower case letter, at least one numeral, and at least one of the special symbols !@#\$%^&*(). The form fields include First Name, Last Name, Login Name, Password, Confirm Password, Email Address, Secret Question, and Answer. Each field has a red asterisk icon indicating it is required. To the right of the Password and Confirm Password fields are blue question mark icons. Below the form fields is a CAPTCHA section with the text 'Please type the characters you see in the picture below before continuing:' and a box containing the characters '33081049'. At the bottom is a 'Continue >>' button. The footer text reads 'Copyright © 2016 Illinois State Board of Education'.

ISBE Home
Home
Sign Up Now
Get Password
Contact Us
Help
IWAS User Guide
IWAS Training Video

Password requirements:

- at least eight (8) characters in length
- contains at least one Upper case letter
- contains at least one Lower case letter
- contains at least one Numeral
- contains at least one of the following special symbols !@#\$%^&*()

* = Required

First Name
Last Name
Login Name
Password
Confirm Password
Email Address
Secret Question
Answer

Please type the characters you see in the picture below before continuing:
33081049

Continue >>

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How do we get an IWAS account?

continued

You will need to request access to the IWAS system, Student Health Data - Immunization. Please refer to the “IWAS User guide PDF” for additional information. For more assistance, contact the ISBE Help Desk at (217) 558-3600.

Get Password

Contact Us

Help

IWAS User Guide

[IWAS Training Video](#)

About SSL Certificate

• contains at least one of the following special symbols !@#5%^&*()

First Name

Last Name

Login Name

Password

Confirm Password

Email Address

Secret Question

Answer

Please type the characters you see in the picture below before continuing:

08304209

Continue >>

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When will the IWAS worksheet be ready?

- The IWAS worksheet with two printable versions (legal [8.5 x 14] or 11x17) should be available before October 17, 2016.
- The completion of the worksheet is to assist in the hand entering data in IWAS, and not for submission alone.

Immunization Data Entry Worksheet
School Year: 2016-2017

In the green box under "Total Number of Students in the Selected Grade," enter the total number of your students in that grade. Then, use each category to record and identify how many students have or have not been immunized. The numbers will total and check against the number you entered under "Total Number of Students in the Selected Grade." If the numbers match, the validation column will say "Good." If the numbers do not match, the column will say "Error."

Disease Category	Protected and in Compliance	Religious Objection	Medical Reason or Objection	Approved Schedule	Homeless Education Assistance/Runaway Vento Act	Unprotected and in Noncompliance (includes transfer students without records)	Total Number of Students in the Selected Grade	Validation
Pre-Kindergarten								
Polio							0.00	Good
DTaP/DTaP/Td							0.00	Good
Measles							0.00	Good
Rubella							0.00	Good
Mumps							0.00	Good
Hepatitis B							0.00	Good
Hib							0.00	Good
Varicella/Chickenpox							0.00	Good
Pneumococcal							0.00	Good
Kindergarten								
Polio							0.00	Good
DTaP/DTaP/Td							0.00	Good
Measles							0.00	Good
Rubella							0.00	Good
Mumps							0.00	Good
Varicella/Chickenpox							0.00	Good
Grade 1								
Polio							0.00	Good
DTaP/DTaP/Td							0.00	Good

When can we start entering data into IWAS?

- IWAS system for Student Health Immunization opens on Monday, October 17, 2016.
- As mandated by Section 5/27-9.1 of the School Code, immunization/health examination data must be submitted for all Illinois schools grades PreK- 12 (not just PreK, K, 6, 9) by Tuesday, November 15, at 11:59 p.m.
- Please use the IWAS user guide for Immunization Electronic Submission
http://www.isbe.state.il.us/research/pdfs/immunization_user_guide.pdf found on the Data Analysis webpage “Health Requirements/Student Health data”
<http://www.isbe.state.il.us/research/htmls/immunization.htm>

Q. If we have first day exclusion date, what date do we use on compliance?

- Your data must match the actual count on the exclusion date.

Q. What is the penalty if schools do not obtain compliance?

- School districts or schools must meet a 90 per cent or better rate of compliance
- Rate is determined by total number of students in need of exams or vaccines minus those exempt through religious or medical waivers minus students without records due to homeless status minus and students awaiting transfer records
- School districts or schools who do not meet 90% compliance, or who do not submit a report, are subject to state withholding of funds

Q. Is there a penalty for parents who do not comply with health record requirements?

- Parents/guardians whose children are not attending school related to their failure to obtain the necessary immunizations and/or physical exams are subject to state compulsory attendance laws. Section 26-10 of the School Code states that any person having custody or control of a child subject to the provisions of this Article to whom notice has been given of the child's truancy and who knowingly and willfully permits such a child to persist in his truancy within that school year, upon conviction thereof shall be guilty of a Class C misdemeanor and shall be subject to not more than 30 days imprisonment and/or a fine of up to \$500.

Q. What does the public know about a school's vaccination compliance rate?

- IWAS report - due by Nov. 15, based on district compliance date (Oct. 15 or earlier, not both)
- By December 1 of each year, schools must make publicly available the immunization data they are required to submit to the ISBE (P.A. 097-0910)
- ISBE and Regional Offices of Education perform monitoring visits
- ISBE data and statistics website includes compliance, noncompliance, and “not reporting,” schools

State Law - Staff

- Tuberculosis testing of new school staff in *all* facilities with preschool-age children



- Vaccines for all employees of *licensed* child care facilities caring for children ages 6 and under:
 - MMR vaccine (two doses, or proof of immunity to measles, mumps and rubella)
 - Tdap vaccine (one dose)
- OSHA: Blood Borne Pathogens eligible HepB



State Law – Health Care Providers

- M.D., D.O., D.C.: Licensed by Medical Practice Act of 1987
- “Mid-level” Practitioners
 - Physical Therapists
 - Physician Assistant
 - Pharmacists
- Illinois State Nurse Practice Acts
 - Registered Nurse (RN) or APN
 - Licensed Practical Nurse (LPN)
 - Differences in scope of practice
 - Check licenses: www.idfpr.com
- Delegation rules
- “Sunset” review of Illinois Nurse Practice Act 2017



Illinois Nurse Practice Act

- (225 ILCS 65/50-20) (was 225 ILCS 65/5-20)
(Section scheduled to be repealed on January 1, 2018)
Sec. 50-20. Unlicensed practice; violation; civil penalty.
 - (a) Any person who practices, offers to practice, attempts to practice, or holds oneself out to practice nursing without being licensed under this Act shall, in addition to any other penalty provided by law, pay a civil penalty to the Department in an amount not to exceed \$10,000 for each offense as determined by the Department. The civil penalty shall be assessed by the Department after a hearing is held in accordance with the provisions set forth in this Act regarding the provision of a hearing for the discipline of a licensee.
 - (b) The Department has the authority and power to investigate any and all unlicensed activity.
 - (c) The civil penalty shall be paid within 60 days after the effective date of the order imposing the civil penalty. The order shall constitute a judgment and may be filed and execution had thereon in the same manner as any judgment from any court of record.

(Source: P.A. 95-639, eff. 10-5-07.)

Activities Reserved for Nurse

- Rule 1.760

<http://www.isbe.net/rules/archive/pdfs/oneark.pdf>

Item h): Duty to provide registered professional nursing services shall not be included in the job description of any other school staff who does not hold nursing license

Activities Reserved for Nurse, *continued*

- Rule 226.800, item k, 2, A: (new item effective Jan. 13, 2016)

<http://www.isbe.net/rules/archive/pdfs/226ark.pdf>

Nothing in this subsection (k) authorizes individual student aides or others who do not hold an appropriate professional license to perform any nursing activity, as nursing activity may be defined in the Nurse Practice Act [225 ILCS 65] and rules governing that Act (68 Ill. Adm. Code 1300), including any procedures and duties requiring a medical order (e.g., tube feedings, catheterizations, administration of medications, tracheal suctioning, tube insertions, blood draws, dressing changes), except as may be otherwise authorized under State law.

Guidance on Rule 226.800(k) and 1.760(h) Related to Nursing Services

- Schools are required to assure that all administrators, teachers, school support personnel, and professional staff are properly licensed and qualified for their assignments. In addition, the district is to ensure that paraprofessionals are assigned only to tasks for which their approval is valid. Paraprofessionals and other non-licensed personnel must be utilized in compliance with the School Code and the Regulations as established by ISBE (www.isbe.net/recognition/pdf/compliance-probe-ref-guide.pdf). A recent regulation, 226.800(k), adds clarifying language to supplement 1.760(h), which requires that staff performing nursing services be properly licensed as nurses (LPN or RN). To ensure compliance with both the School Code and ISBE rules, school staff should review the job descriptions and duties of their paraprofessionals and teacher aides and consider other staffing arrangements, if necessary, to be compliant with regulation and law. Any perceived violation of an ISBE rule governing the provision of services for students with disabilities may be submitted via the complaint process at www.isbe.net/special/html/complaint_investigation.htm. Guidance on which medical/nursing procedures are restricted to those holding a valid Illinois health care provider license is available on page 4 of the May 11, 2016 issue of the Superintendent's Weekly Message <http://www.isbe.net/board/archivemessages/2016/message-05112016.pdf>
- Equally important is the requirement that those providing teaching services to students be licensed. RNs or LPNs who provide those nursing services in schools are not permitted to serve as “teacher aide” and “assist in the instruction of pupils” unless they also hold a paraprofessional license or other license as outlined in Rule 1.630, <http://www.isbe.net/rules/archive/pdfs/oneark.pdf>.

Nursing services provided by LPN

- Rules of Practice for LPN:
 - Assist in the nursing plan
 - Carries out medical and nursing plan under RN delegation and supervision
 - Schools must have written agreement or memo of understanding regarding delegation and supervision
 - Agency LPNs are under the agency RN in collaboration with building or district RN

Q. What Can be Delegated?

(Illinois Nurse Practice Act and Rules)

- Nursing “activity” can be delegated only to another licensed nurse
- Nursing “activity” requires making decisions and judgments requiring use of knowledge acquired by completion of an approved program for licensure as a practical, professional or advanced practice nurse.
- "Task" means work not requiring professional knowledge, judgment and/or decision making (Section 50-75 of the Act)
- “Sunset” Law: NPA under review; delegation rules may be revised

Q. If a nurse is not available to complete a g-tube feed, may an administrator do the feeding?

- No, an administrator cannot do the feedings
- Nurse connect, start and stop/disconnect continuous, regulated feedings; must stay with hand-held, gravity flow feedings
- Instruct others to stop feeding if any alarms are triggered and call nurse
- Schedules: may stagger tube feedings, similar to lunch periods for other students

Q. Who can give medications in schools?

- P.A. 90-0789 requires medication policy
- P.A. 91-0719 -- four principles
 - Limits reasons for medications to be administered
 - Authorizes being given by RN or administrator
 - Prevents any other school staff from being required to give medications
 - Allows school staff to assist a student in an emergency
- http://www.isbe.net/school_health.htm
- ISBE Medication Guidance under revision

Medicinal Marijuana

- Public Act 098-0775 and 098-0122
 - Amends Compassionate Use of Medical Cannabis Act
 - Allows use for under age 18
 - Rules are under IDPH jurisdiction
 - Law prohibits its presence on school grounds or on school transportation
- AAP statement on use in children - contraindicated
- Remains Schedule I, Controlled Substances Act, FDA - “no medicinal value”
- ISBE guidance:
http://isbe.net/school_health.htm?col23=open#CollapsiblePanel23

Q. What is being done about the cost of the Epi-Pen?

- American Academy of Pediatrics (AAP) leaders at the Annual Leadership Forum deemed addressing the cost of epinephrine auto-injectors one of their top 10 resolutions and also approved a resolution asking the Food and Drug Administration why expiration dates for such devices are only about a year. They renewed both of those calls on Friday, Sept. 2.
- They suggested that pediatricians look for local pharmacies that offer the generic of Adrenaclick, a product that is similar to EpiPens and sometimes cheaper.
- They also should direct patients to EpiPen manufacturer Mylan's patient assistance program, and to savings cards for EpiPen and generic Adrenaclick.

NASN: Options or Access to Epinephrine Auto-Injectors

- Generic/Branded Epinephrine Auto-injector - www.adrenaclick.com
- EpiPen Products:
 - For the **Uninsured & Underinsured**: Patient assistance program - For patients without insurance, Mylan is doubling the income eligibility of its patient assistance program to broaden the scope of patients who qualify for the program. The program has also expanded to cover underinsured patients whose pharmacy coverage is limited to generics. Qualifying patients will receive the product free.
 - For the **Insured**: My EpiPen Savings Card™ - For patients with commercial insurance, Mylan is increasing the My EpiPen Savings Card™ to now cover up to \$300 for each EpiPen 2-Pak® carton per prescription, up to six EpiPen 2-Pak® or EpiPen Jr 2-Pak® cartons. This offer is active on EpiPen.com and through coupon cards available in many healthcare professionals' offices. (The \$100 coupon cards convert to \$300 at the pharmacy)
 - Free Epi-Pen® to schools who have physician orders for stock epinephrine

Opioid Antagonist: “Narcan” or “Naloxone” Law

- P.A. 99-480; rule 1.540 revised with epinephrine rule and adopted Jan. 6, 2016
- Similar to law and rules on undesignated epinephrine
- Report required to ISBE upon use
- Antidote for opiates, both legal and illegal forms
- Authorizes (but does not require) the administration of opioid antagonist by school nurses or trained personnel to "any person (who) the school nurse or trained personnel in good faith believes is having an opioid overdose"

Evaluation for Special Education - Health

- Federal IDEA requirement to fully evaluate students for determining eligibility for special education services
- Requirement is not new; dates to the 1970s
- ISBE Rule 226.160 defines the medical review evaluation process
- Components of Medical Review (IAC 226.160): Parts 1-4, assessment and data collection; Part 5, recommendations, goals, evaluation
<http://www.isbe.net/rules/archive/pdfs/226ark.pdf>
- Personnel qualified to perform Medical Review
 - Parts 1-4: RN with PEL, with designation, or with baccalaureate; MD
 - Part 5: RN with PEL endorsement or designation
- Credentials are searchable on the Educator Licensure Information System
- No other personnel qualified to assume responsibility for this evaluation

What Changed on July 1?

- A school district or special education cooperative that does not have a person qualified to perform all five components of a Medical Review by June 30, and needs one, must be “actively engaged” in an effort to recruit and hire a registered nurse who holds the PEL endorsement in school nursing.
- “Active engagement” can be demonstrated by a position posting that is publicized in a way that would demonstrate effort to recruit a qualified candidate.
- The posting for a position that requires the PEL endorsement must meet the requirements of the School Code (105 ILCS 5/21B-25), which stipulates that the “holder of such an endorsement is entitled to all of the rights and privileges granted holders of any other Professional Educator License, including teacher benefits, compensation, and working conditions.”

Required Documents

Six required documents a district/cooperative submits to ISBE for review and approval:

1. The position posting as advertised; evidence of appropriateness
2. The results of such recruitment; if unsuccessful, then:
3. Letter from the public school district or special education cooperative administrator indicating that the RN's duties will include providing educational evaluation and instructional judgment for students being evaluated or reevaluated for special education services
4. Cover letter from the RN, including degree(s) (at least a bachelor's degree in nursing, education, or related field)
5. Copy of current RN licensure
6. Proof of current employment (pay stub) or notice of hire (contract, board minutes) by the district or special education cooperative, or agency contracted.

Q. If my Type 73 comes up for renewal this year, how do I do it?

Professional Educator License (PEL) Renewal

Formerly known as “certificate” Type 73

- Those holding a PEL license that is up for renewal in 2017 may begin renewal process on April 1.
- Your “PD Provider” is IDFPR if you affirm that you met the PD requirements for RN license (20 hours every renewal) by entering “120” in the hours section.

Q. What is the state's advice on handling head lice?

- ISBE follows the guidance of American Academy of Pediatrics
- Treat, do not exclude, for nits or live lice
- Student civil rights to attend school may be violated if any exclusionary action is taken
- Parent should consult with pharmacist or health care provider

Home or Hospital Instruction

- Guidance – home-hospital instruction and reimbursement, Rule 226.300
 - Medical certification form
 - MD signature - “licensed to practice medicine in all its branches”
 - Date of physician signature
 - Services do not have to be reimbursed if began before the physician statement received
 - District does not have to accept hospital tutor
 - Services can be provided by a district tutor
 - Q&A posted on ISBE

Required Health Training for School District Personnel

P.A. 98-0471, P.A. 99-0030, P.A. 99-0443, P.A. 99-0616 require staff training on:

- Signs of mental illness and suicidal behavior (grades seven through 12, staff - frequency not specified)
- Domestic violence, sexual violence, and needs of pregnant/parenting youth (every two years)
- Anaphylactic reactions and management (at least every two years)
- Psychotropic medications
- Model district suicide prevention policy
- Instruction on prevalent student chronic health conditions
- Americans with Disabilities Act (NEW – effective this year)

Federal and state OSHA laws (blood-borne pathogen)

- Registered nurse may be utilized for staff training; “canned” training does not always meet the full requirements of law or rule
- District emergency procedure to be followed in cases of injury to, or sudden illness of, students and/or staff (23 IAC 1.530)

Care of Students with Diabetes Act

- Authorizes a DCA (delegated care aide) to provide care that is usually in the domain of a nurse
- Training for the specific student is to be individualized, according to the student's DMMP, with parent and student
- Initial instruction by CDE or MD
- School nurse oversight is inferred
- Staff must really volunteer, not be required to accept assignment as DCA
- Requires a 504 plan

Required Student Health Education Topics

- Prevention and control of disease, including in grades 6-12, prevention, transmission and spread of AIDS
- Age-appropriate sexual abuse and assault awareness and prevention, pre-k through grade 12
- Medical and legal aspects of alcohol, drug use and abuse, tobacco use
- Evidence-based and medically accurate information regarding sexual abstinence
- Abandoned Newborn Infant Protection Act
- Cardiopulmonary resuscitation /automated external defibrillator (CPR/AED) training (P.A. 98-0632) in high school: negotiable in IEP; consider cognition as well as physical skills
- And more...at Illinois Critical Health Problems and Comprehensive Health Education Act

Erin's Law (P.A. 97-1147)

- Erin, one who was victimized by child sexual abuse, is an advocate for early learning related to child sexual abuse awareness by children
- Law amends School Code and the Critical Health Problems and Comprehensive Health Education Act (105 ILCS 110/3)
- All public schools must implement an age-appropriate child sexual abuse prevention and awareness program with students in grades pre-kindergarten through grade 12.
- Limited research available on the effects of specific curricula
- ISBE has chosen not to promote any specific prevention curriculum, but refer to non-profit associations that recommend core components

Ann Marie's Law

Youth Suicide Awareness and Prevention

- Public Act 099-0443: Schools beginning 2015-16 must review/revise existing suicide prevention and awareness policy, or create one
- A youth suicide awareness and prevention policy is required pursuant to 105 ILCS 5/2-3.163, amended by Public Act 99-443.
- ISBE created a task force from a variety of stakeholders to develop a model policy that schools may use and provide resources and recommendations.
- **Model Suicide Prevention Policy Available to All Districts in Illinois**
 - The Illinois State Board of Education and the Illinois Association of School Boards (IASB) collaborated on a model policy available to all school districts in Illinois. To request a copy, please email IASB at lbremer@iasb.com with the subject line: Suicide Awareness & Prevention Policy Request.
- For more information, please visit www.iasb.com/law/sdprevention.cfm.

CPR/AED Training for High School Students

Training of high school students:

- Public Act 98-0632 became effective July 1, 2014
- Beginning with the 2014-2015 school year, training on CPR and AEDs shall be included in the curricula for all secondary schools
- CPR / AED for staff is referenced in athletic facilities laws (rules per IDPH)
- Parents may opt children out of CPR/AED and “family life” or sexual health education



References

In addition to ISBE resources and the School Code, these resources were used in preparation of this session:

American Academy of Pediatrics, Council on School Health. (2004). *School Health Policy and Practice* (6th Ed.) Elk Grove Village., IL: American Academy of Pediatrics.

American Academy of Pediatrics, National Association of School Nurses. (2011). *The Scope and Standards of Practice for School Nursing*.

American Academy of Pediatrics, Council on School Health and Committee on Infectious Diseases. (2015). *Pediatrics*, 135(5).

Gelfman, M. & Schwab, N. (2005). *Legal issues in school health services*. Authors Choice Press.

Illinois Department of Financial and Professional Regulation, accessed at <http://www.idfpr.com/PROFS/Info/nursing.asp>

Illinois General Assembly, <http://www.ilga.gov>

Contact Information

- Questions regarding the compliance with health requirements, monitoring and compliance, and general questions regarding health requirements in the School Code: Jessica Gerdes, ISBE, (312) 814-8252, JGerdes@isbe.net.
- Questions regarding the specific immunization requirements: Janet Daniels, IDPH, (630) 293-6800, Janet.Daniels@illinois.gov.
- Questions regarding proof of immunity reviews: see regional contact information at http://www.isbe.net/school_health.htm?col12=open#CollapsiblePanel12
- Questions regarding general health requirements and child health examinations or approved forms: Vyki Jackson, DHS, (217) 524-1844, Victoria.Jackson@illinois.gov.
- Questions regarding Vision and Hearing Screening and Referral: IDPH Division of Health Assessment & Screening at (217) 524-2396. Vision and hearing questions can also be sent to the DPH.VisionandHearing@Illinois.gov mailbox.
- Questions regarding reporting of school health data to ISBE: Dr. Marjorie Ribeiro, ISBE Data Analysis and Accountability, (217) 782-3950, mrribeiro@isbe.net.
- Questions regarding general nursing rules and regulations, or guidance on practice issues, should first be referred to the district nurse, if available; additional guidance may be available by contacting Ms. Gerdes (ISBE) or Ms. Jackson (IDPH), or IASN leadership.



**Illinois
State Board
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