

WESTFIELD PUBLIC SCHOOLS
Westfield, New Jersey 07090

PUPILS
5310
Health Services
M

Regulations Follow

Page 1 of 4

5310 HEALTH SERVICES

The Board of Education shall develop and adopt the following written policies, procedures, and mechanisms in accordance with N.J.A.C. 6A:16-2.1(a) for the provision of health, safety, and medical emergency services and ensure staff members are informed as appropriate:

1. The review of immunization records for completeness pursuant to N.J.A.C. 8:57-4.1 through 4.20 (Policy and Regulation 5320-Immunization).
2. The administration of medication to pupils in the school setting in accordance with N.J.A.C. 6A:16-2.1(a)2 (Policy and Regulation 5330-Administration of Medicine).
3. The review of Do Not Resuscitate (DNR) Orders received from the pupil's parent(s) or legal guardian(s) or medical home (Policy 5332 Do Not Resuscitate Orders);
4. The provision of health services in emergency situations including:
 - a. The emergency administration of epinephrine via EpiPen auto-injector pursuant to N.J.S.A. 18A:40-12.5 (Policy and Regulation 5330-Administration of Medicine);
 - b. The emergency administration of glucagon pursuant to N.J.S.A. 18A:40-12.14 (Policy 5338 Diabetes Management);
 - c. The care of any pupil who becomes injured or ill while at school or participating in school-sponsored functions (Policy and Regulation 8441-Care of Injured and Ill Persons);
 - d. The transportation and supervision of any pupil determined to be in need of immediate care (Policy and Regulation 8441-Care of Injured and Ill Persons);
 - e. The notification to parent(s) or legal guardian(s) of any pupil determined to be in need of immediate medical care (Policy and Regulation 8441-Care of Injured and Ill Persons); and
 - f. The establishment and implementation of an emergency action plan for responding to a sudden cardiac event, including the use of an automated external defibrillator (AED), pursuant to N.J.S.A. 18A:40-41b (Policy and Regulation 5300 Automated External Defibrillators).

5. The treatment of asthma in the school setting in accordance with N.J.A.C. 6A:16-2.1(a)5 (Policy 5335-Treatment of Asthma).
6. The administration of pupil medical examinations, pursuant to N.J.S.A. 18A:40-4, N.J.S.A. 18A:35-4.8, and N.J.A.C. 6A:16-2.2 (Policy and Regulation 5310-Health Examinations).
7. Utilization of sanitation and hygiene when handling blood and bodily fluids pursuant to N.J.A.C. 12:100-4.2, Safety and Health Standards for Public Employees, and in compliance with 29 CFR 1910.1030, Public Employees Occupational Safety and Health Program (PEOSH) Bloodborne Pathogens Standards (Policy and Regulation 7420 Hygienic Management);
8. Provision of nursing services to nonpublic schools located in the school district as required by N.J.S.A. 18A:40-23 et seq. and N.J.A.C. 6A:16-2.5 (Policy and Regulation 5306-Health Services to Non-Public Schools);
9. Self-administration of medication by a student for asthma or other potentially life-threatening allergic reaction pursuant to N.J.S.A. 18A:40-12.3, 12.5, and 12.6, and the self-management and care of a student's diabetes as needed pursuant to N.J.S.A. 18A:40-12.15 (Policy and Regulation 5330);
10. Development of an individual healthcare plan and individualized emergency healthcare plan for students with chronic medical conditions, including life-threatening allergies, diabetes, and asthma, requiring special health services in accordance with N.J.S.A. 18A:40-12.11.c, 12.12, 12.13, and 12.15; and N.J.A.C. 6A:16-2.3(b)3xii (Policies and Regulations 5331 and 5338 and Policy 5335); and
11. Management of food allergies in the school setting and the emergency administration of epinephrine to students for anaphylaxis pursuant to N.J.S.A. 18A:40-12.6a through 12.6d (Policy and Regulation 5331).

The Board of Education shall annually adopt the school district's nursing services plan at a regular meeting.

The Board of Education shall comply with the following required health services as outlined in N.J.A.C. 6A:16-2.2:

1. Immunization records shall be reviewed and updated annually pursuant to N.J.A.C. 8:57-4.1 through 4.24.

2. A Building Principal or designee shall not knowingly admit or retain in the school building any pupil whose parent(s) or legal guardian(s) has not submitted acceptable evidence of the child's immunization, according to the schedule specified in N.J.A.C. 8:57-4, Immunization of Pupils in School.
3. The school district shall perform tuberculosis tests on pupils using methods required by and when specifically directed to do so by the New Jersey Department of Health based upon the incidence of tuberculosis or reactor rates in specific communities or population groups pursuant to N.J.S.A. 18A:40-16.
4. The school district shall immediately report by telephone to the Westfield Health Officer any communicable diseases identified as reportable pursuant to N.J.A.C. 8:57-1, whether confirmed or presumed.,
5. Each school in the district shall have and maintain for the care of pupils at least one nebulizer in the office of the school nurse or a similar accessible location pursuant to N.J.S.A. 18A:40-12.7.
6. Each pupil medical examination shall be conducted at the medical home of the pupil. If a pupil does not have a medical home, the school district shall provide the examination at the school physician's office or other comparably equipped facility pursuant to N.J.S.A. 18A:40-4.
7. The findings of required examinations under 8.b., c., d., and e. below shall include the following components:
 - a. Immunizations pursuant to N.J.A.C. 8:57-4.1 through 4.24;
 - b. Medical history, including allergies, past serious illnesses, injuries, operations, medications, and current health problems;
 - c. Health screenings including height, weight, hearing, blood pressure, and vision; and
 - d. Physical examinations.
8. The school district shall ensure that pupils receive medical examinations in accordance with N.J.A.C. 6A:16-2.2(f) and 6. above and:
 - a. Prior to participation on a school-sponsored interscholastic or intramural team or squad for pupils enrolled in grades six to twelve in accordance with N.J.A.C. 6A:16-2.2(h)1;
 - b. Upon enrollment into school in accordance with N.J.A.C. 6A:16-2.2(h)2;

- c. When applying for working papers in accordance with N.J.A.C. 6A:16-2.2(h)3;
 - d. For the purposes of the comprehensive Child Study Team evaluation pursuant to N.J.A.C. 6A:14-3.4 in accordance with N.J.A.C. 6A:16-2.2(h)4; and
 - e. When the pupil is suspected of being under the influence of alcohol or controlled dangerous substances, pursuant to N.J.S.A. 18A:40A-12 and N.J.A.C. 6A:16-4.3 in accordance with N.J.A.C. 6A:16-2.2(h)5.
9. Each school shall have available and maintain an AED, pursuant to N.J.S.A. 18A:40-41a.a(1) and (3), and in accordance with N.J.A.C. 6A:16-2.2(i).
10. The Board of Education shall make accessible information regarding the New Jersey FamilyCare Program to pupils who are knowingly without medical coverage pursuant to N.J.S.A. 18A:40-34.
11. Information concerning a pupil's HIV/AIDS status shall not be required as part of the medical examination or health history pursuant to N.J.S.A. 26:5C-1 et seq.
12. The school nurse shall ensure that pupils receive health screenings as outlined in N.J.A.C. 6A:16-2.2 (l).
13. The school nurse or designee shall screen to ensure hearing aids worn by pupils who are deaf and/or hard of hearing are functioning properly. The school nurse or designee will ensure any FM hearing aid systems in classrooms or any school equipment in the school building used to assist pupils hear are functioning properly.

N.J.S.A. 18A:40-4 et seq.
N.J.A.C. 6A:16-1.3; 6A:16-2.1; 6A:16-2.2

Approved: November 20, 2007
First Reading: December 5, 2017
Second Reading: January 4, 2018

R 5310 HEALTH SERVICES

A. Definitions – N.J.A.C. 6A:16-1.3

1. Advanced practice nurse (APN) – means a person who holds a current license as nurse practitioner/clinical nurse specialist from the State Board of Nursing.
2. Certified school nurse – means a person who holds a current license as a registered professional nurse from the State Board of Nursing and an Educational Services Certificate, school nurse or school nurse/non-instructional from the Department of Education pursuant to N.J.A.C. 6A:9B-12.3 and 12.4.
3. Medical home – means a health care provider, including New Jersey FamilyCare providers, as defined by N.J.S.A. 30:4J-12 and the provider’s practice site chosen by the pupil’s parent or legal guardian for the provision of health care.
4. Noncertified nurse – means a person who holds a current license as a professional nurse from the State Board of Nursing and is employed by a Board of Education or nonpublic school, and who is not certified as a school nurse by the Department of Education.
5. Parent – means the natural parent(s), adoptive parent(s), legal guardian(s), foster parent(s), or parent surrogate(s) of a student. When parents are separated or divorced, “parent” means the person or agency who has legal custody of the student, as well as the natural or adoptive parent(s) of the student, provided parental rights have not been terminated by a court of appropriate jurisdiction.
6. Physician assistant (PA) – means a health care professional licensed to practice medicine with physician supervision.
7. Physical examination – means the examination of the body by a professional licensed to practice medicine or osteopathy or an advanced practice nurse, or physician assistant. The term includes very specific procedures required by statute as stated in N.J.A.C. 6A:16-2.2.
8. School physician – means a physician with a current license to practice medicine or osteopathy from the New Jersey Board of Examiners who works under a contract or as an employee of the school district. The physician is also referred to as the medical inspector as per N.J.S.A. 18A:40-1.

B. Medical Examinations – General Conditions

1. Each pupil medical examination shall be conducted at the medical home of the pupil. If a pupil does not have a medical home, the school district shall provide the examination at the school physician's office or other comparably equipped facility pursuant to N.J.S.A. 18A:40-4.
2. The findings of required examinations under D. through G. below shall include the following components:
 - a. Immunizations pursuant to N.J.A.C. 8:57-4.1 through 4.16;
 - b. Medical history including allergies, past serious illnesses, injuries and operations, medications, and current health problems;
 - c. Health screenings including height, weight, hearing, blood pressure, and vision; and
 - d. Physical examinations.
3. Each school shall have available and maintain an automated external defibrillator (AED), pursuant to N.J.S.A. 18A:40-41a.a(1) and (3), that is:
 - a. In an unlocked location on school property, with an appropriate identifying sign;
 - b. Accessible during the school day and any other time when a school-sponsored athletic event or team practice is taking place in which students of the school district or nonpublic school are participating; and
 - c. Within a reasonable proximity of the school athletic field or gymnasium, as applicable.
4. The Board of Education shall make accessible information regarding the NJ FamilyCare Program for pupils who are knowingly without medical coverage pursuant to N.J.S.A. 18A:40-34.
5. Pursuant to N.J.S.A. 18A:40-4.4, a pupil who presents a statement signed by his/her parent(s) or legal guardian(s) that required examinations interfere with the free exercise of his/her religious beliefs shall be examined only to the extent necessary to determine whether the pupil is ill or infected with a communicable disease or under the influence of

alcohol or drugs or is disabled or is fit to participate in any health, safety, or physical education course required by law.

6. Information concerning a pupil's HIV/AIDS status shall not be required as part of the medical examination or health history pursuant to N.J.S.A. 26:5C-1 et seq.

C. Medical Examinations - Prior to Participation on a School-Sponsored Interscholastic or Intramural Athletic Team or Squad for Pupils Enrolled in Grades Six to Twelve

1. The school district shall ensure that pupils receive medical examinations prior to participation on a school-sponsored interscholastic or intramural team or squad for pupils enrolled in grades six to twelve. The examination shall be conducted within 365 days prior to the first day of official practice session in an athletic season and shall be conducted by a licensed physician, APN, or PA.
2. The physical examination shall be documented using the Pre-participation Physical Evaluation (PPE) form developed jointly by the American Academy of Family Physicians, American Academy of Pediatrics, American College of Sports Medicine, American Medical Society for Sports Medicine, American Orthopedic Society for Sports Medicine, and American Osteopathic Academy of Sports Medicine and is available online at:
<http://www.state.nj.us/education/students/safety/health/records/athleticphysicalsform.pdf>
in accordance with N.J.S.A. 18A:40-41.7.
 - a. Prior to performing a pre-participation physical examination, the licensed physician, APN, or PA who performs the student-athlete's physical examination shall complete the Student-Athlete Cardiac Screening professional development module and shall sign the certification statement on the PPE form attesting to the completion, pursuant to N.J.S.A. 18A:40-41d.
 - (1) If the PPE form is submitted without the signed certification statement and the school district has confirmed that the licensed physician, APN, or PA from the medical home did not complete the module, the student-athlete's parent may obtain a physical examination from a physician who can certify completion of the module or request that the school physician provides the examination.
 - b. The medical report shall indicate if a student is allowed or not allowed to participate in the required sports categories and shall be completed and signed by the original examining physician, APN, or PA.

- c. An incomplete form shall be returned to the student's medical home for completion unless the school nurse can provide documentation to the school physician that the missing information is available from screenings completed by the school nurse or physician within the prior 365 days.
3. Each student whose medical examination was completed more than ninety days prior to the first day of official practice in an athletic season shall provide a health history update questionnaire completed and signed by the student's parent. The completed health history update questionnaire shall include information listed below as required by N.J.S.A. 18A:40-41.7.b. The completed health history update questionnaire shall be reviewed by the school nurse and, if applicable, the school athletic trainer and shall include information as to whether, in the time period since the date of the student's last pre-participation physical examination, the student has:
 - a. Been advised by a licensed physician, APN, or PA not to participate in a sport;
 - b. Sustained a concussion, been unconscious, or lost memory from a blow to the head;
 - c. Broken a bone or sprained, strained, or dislocated any muscles or joints;
 - d. Fainted or blacked out;
 - e. Experienced chest pains, shortness of breath, or heart racing;
 - f. Had a recent history of fatigue and unusual tiredness;
 - g. Been hospitalized, visited an emergency room, or had a significant medical illness;
 - h. Started or stopped taking any over the counter or prescribed medications;
or
 - i. Had a sudden death in the family, or whether any member of the student's family under the age of fifty has had a heart attack or heart trouble.
4. The school district shall provide to the parent written notification signed by the school physician stating approval of the student's participation in athletics based upon the medical report or the reasons for the school physician's disapproval of the student's participation.

5. The Board of Education will not permit a student enrolled in grades six to twelve to participate on a school-sponsored interscholastic or intramural team or squad unless the student submits a PPE form signed by the licensed physician, APN, or PA who performed the physical examination and, if applicable, a completed health history update questionnaire, pursuant to N.J.S.A. 18A:40-41.7.c.
6. The school district shall distribute to a student-athlete and his or her parent the sudden cardiac arrest pamphlet developed by the Commissioner of Education, in consultation with the Commissioner of Health, the American Heart Association, and the American Academy of Pediatrics, pursuant to N.J.S.A. 18A:40-41.
 - a. A student-athlete and his or her parent annually shall sign the Commissioner-developed form that they received and reviewed the pamphlet, and shall return it, to the student's school pursuant to N.J.S.A. 18A:40-41.d.
 - b. The Commissioner shall update the pamphlet, as necessary, pursuant to N.J.S.A. 18A:40-41.b.
 - c. The Commissioner shall distribute the pamphlet, at no charge, to all school districts and nonpublic schools, pursuant to N.J.S.A. 18A:40-41.b.

D. Medical Examinations - Upon Enrollment in School

1. The school district shall ensure that pupils receive medical examinations upon enrollment in school. The school district requires a parent to provide within thirty (30) days of enrollment entry-examination documentation for each student.
2. When a pupil transfers to another school, the sending school district shall ensure the entry-examination documentation is forwarded to the receiving school district pursuant to N.J.A.C. 6A:16-2.4(d).
3. Pupils transferring into this school district from out-of-State or out-of-country may be allowed a thirty-day period to obtain entry-examination documentation.
4. The school district shall notify parents, through its website or other means, of the importance of obtaining subsequent medical examinations of the pupil at least once during each developmental stage: at early childhood (pre-school through grade three), pre-adolescence (grades four through six) and adolescence (grades seven through twelve).

E. Medical Examinations - When Pupils Apply for Working Papers

1. Pursuant to N.J.S.A. 34:2-21.7 and 34:2-21.8(3), the school district may provide for the administration of medical examinations for a pupil pursuing a certificate of employment.
2. The school district shall not be held responsible for the costs for examinations at the pupil's medical home or other medical provider(s).

F. Medical Examinations - For the Purposes of the Comprehensive Child Study Team Evaluation Pursuant to N.J.A.C. 6A:14-3.4

1. The school district shall ensure that pupils receive medical examinations for the purposes of the comprehensive Child Study Team evaluation pursuant to N.J.A.C. 6A:14-3.4.

G. Medical Examinations - When a Pupil is Suspected of Being Under the Influence of Alcohol or Controlled Dangerous Substances pursuant to N.J.S.A. 18A:40A-12 and N.J.A.C. 6A:16-4.3

1. If a pupil who is suspected of being under the influence of alcohol or controlled dangerous substances is reported to the certified school nurse, the certified school nurse shall monitor the pupil's vital signs and general health status for emergent issues and take appropriate action pending the medical examination pursuant to N.J.A.C. 6A:16-4.3.
2. No school staff shall interfere with a pupil receiving a medical examination for suspicion of being under the influence of alcohol or controlled dangerous substances pursuant to N.J.A.C. 6A:16-4.3.

H. Health Screenings

The Board of Education shall ensure that pupils receive health screenings in accordance with N.J.A.C. 6A:16-2.2(l).

1. Screening for height, weight, and blood pressure shall be conducted annually for each pupil in Kindergarten through grade twelve.
2. Screening for visual acuity shall be conducted biennially for pupils in Kindergarten through grade ten.

3. Screening for auditory acuity shall be conducted annually for pupils in Kindergarten through grade three and in grades seven and eleven pursuant to N.J.S.A. 18A:40-4.
4. Screening for scoliosis shall be conducted biennially for pupils between the ages of ten and eighteen pursuant to N.J.S.A. 18A:40-4.3.
5. Screenings shall be conducted by a school physician, school nurse, , or other school personnel properly trained.
6. The school district shall notify the parent(s) or legal guardian(s) of any pupil suspected of deviation from the recommended standard.

In Effect: November 20, 2007

Revised:

5310.1 HEALTH EXAMINATIONS

The Board of Education requires that all pupils enrolled in the district receive a physical examination in accordance with 18A:40-4 to determine if any physical defect exists that impacts on a child's ability to learn. This examination will be conducted for pupils in grades kindergarten, 4, 8 and 11 and students new to the district by the school medical inspector with the assistance of the school nurse. In lieu of the examination by the school medical inspector, the school nurse may accept the report of such an examination by a physician licensed to practice medicine or by a nurse practitioner/clinical nurse specialist licensed in New Jersey working in collaboration with a physician. An examination by a physician other than the district medical inspector shall be at no expense to the board and submitted on a form furnished by the board. Any pupil shall be exempt from the health examination upon written request of his parent or guardian.

The results of physical examinations and screenings shall be reported to the pupil's parent or legal guardian when any condition is identified that requires follow up by the pupil's medical home.

The superintendent shall direct all teaching staff members to promptly report any physical defect or disability to the school nurse.

Pupil health examinations shall include:

- immunizations;
- the pupil's health history; height, weight, blood pressure, vision and hearing screenings;
- physical examination of pupil's body.

No physical examinations shall require screening or disclosure of HIV status.

Other Required Health Examinations

An examination of each candidate for a school athletic team will be conducted prior to the first official practice session (which shall include tryouts) by the athletes' medical home or by the district medical inspector where no report is available from the medical home. The medical examination shall include a health history questionnaire, completed and signed by the parent in accordance with Policy 2460 and N.J.A.C. 6A:16-2.2h,1-6.

A student shall be examined pursuant to a comprehensive Child Study Team evaluation as required by N.J.A.C. 6A:14-3.4

A student may be examined when applying for working papers pursuant to N.J.S.A. 34:2-21.7 and 34:2-21.8(3)

Pupils suspected of being under the influence of alcohol, controlled dangerous substances or anabolic steroids shall be examined in accordance with Policy 5530 and N.J.A.C.6A:16-4.3 and N.J.S.A. 18A:40A-12.

Screening for Tuberculosis

Screening for tuberculosis shall be conducted for pupils transferring into this district from out of state or out of country as may be required by the State Department of Health 18A:40-16

Screening for Scoliosis

Each pupil between the ages of ten and 18 years of age shall be examined biennially for scoliosis by the school nurse or school medical inspector pursuant to N.J.S.A. 18A40-4.3.

Audiometric Screening

Audiometric screening will be conducted for pupils enrolled in preschool programs; pupils enrolled in grades kindergarten, 1, 2, 3, 7, and 11; pupils entering the district with no recent record of hearing screening; pupils at risk for hearing impairments; and pupils referred for screening by a teacher or parent or legal guardian, or at the pupil's request.

Pupils are at risk for hearing impairments if they have communication disorders, cleft palate, allergies, frequent upper respiratory or middle ear infections; take ototoxic medication; or are exposed to sudden or continuous loud noises.

Vision Screening

Vision screening will be administered to all entering pupils and biennially to all pupils in kindergarten through grade 10, in accordance with the vision screening program developed in consultation with the school medical inspector.

N.J.S.A.	18A:35-4.8; 18A:40-4 et seq.;
	18A:40-16 et seq.
N.J.S.A.	44:6-2
N.J.A.C.	6:28-3.4(d); 6:29-2.1 et seq.; 6:29-3.4;
	6:29-4.1; 6:29-5.1 et seq.; 6:29-6.5
N.J.A.C.	8:52-7.1 et seq.

Approved: November 13, 2001
First Reading: December 5, 2017
Second Reading: January 4, 2018

R 5310.1 HEALTH EXAMINATIONS

A. Physical Examination N.J.A.C. 6:29-2.1

A physical examination required by Policy No. 5310, conducted by the school medical inspector or a pupil's medical home, will consist of the following components.

1. Review of immunizations, in accordance with Policy No. 5320.
2. Health history including allergies, past serious illnesses, injuries, operations, medications, and current health problems. A pupil's health history should be obtained from the parent /guardian or the adult pupil. Pupil physicals/examinations shall not require disclosure of HIV status.
3. Screenings including height, weight, hearing, vision and blood pressure.
4. Examination of the pupil's:
 - a. Height, weight, pulse, blood pressure;
 - b. Skin, for pallor, rashes, scalp, acne, eczema, lymphatics, presence of infection, trauma, jaundice, purpura;
 - c. Head, for symmetry;
 - d. Eyes, for inspection of lids, conjunctiva and pupils;
 - e. Ears, nose and throat, for inspection of mucous membranes, pharynx, tonsils, sinuses; speech noted; external ear examination and otoscopic examination;
 - f. Neck, for glands, nodes, masses, thyroid;
 - g. Bony thorax, for symmetry;
 - h. Heart, for significant murmurs, arrhythmias;
 - i. Lungs, for percussion, auscultation;
 - j. Abdomen, for masses, tenderness, hernia, presence of enlarged liver or spleen;
 - k. Genitalia, for development, abnormalities (may be omitted for females);
 - l. Extremities, for axillary nodes, musculoskeletal function, flat feet, abnormal gait, or asymmetry, fungus disease, plantar warts; and
 - m. Back, for curvature, posture.

B. Scoliosis Examination N.J.S.A. 18A:40-4.3

A scoliosis examination will be conducted by the school medical inspector, school nurse, or other staff member trained in scoliosis screening as follows:

1. Pupil stands with back to screener with clothing loosened or removed to expose back. Screener checks for the following:
 - a. Unequal shoulder levels,
 - b. Symmetry of scapulae,
 - c. Alignment of spinous processes,
 - d. Symmetry of flanks,
 - e. Uneven or greater crease at one side of waist, and
 - f. Unequal distance between body and the elbow when both arms are hanging straight down from shoulder.
2. Pupil faces screener and bends to 90° at the waist, feet together, knees straight, and arms hanging in front with palms together. Screener may sit facing pupil and check the following:
 - a. Rib hump (one side of upper back higher than the other),
 - b. Hump in both upper and lower back, and
 - c. Levels of the back on both sides of the spine.
3. The parent /guardian of any pupil suspected of having scoliosis shall be notified. Such notification shall include an explanation of scoliosis, the significance of treating it at an early stage, and the public services available, after diagnosis, for such treatment.
4. A pupil will be excused from scoliosis screening on the written request of his or her parent or legal guardian.

C. Audiometric Screening N.J.A.C. 6:29-5.1 et seq.

Audiometric screening will be conducted as follows:

1. The hearing screening shall be conducted by a medical inspector, certified school nurse or school employee trained in audiometric screening and working under the supervision of the medical inspector. All screening shall be conducted in cooperation with the school nurse.
2. The screening shall be conducted with an audiometer that is calibrated annually in accordance with ANSI S3.6-1969, American National Standard Specifications for Audiometers, as amended.
3. Each pupil shall be screened individually in a 20dB HL screening room at the frequencies of 500Hz, 1000Hz, 2000Hz, 3000Hz, and 4000Hz.
4. If a pupil fails the first screening, the school nurse, using an otoscope, may look into the external ear canal and identify any condition which could interfere with the hearing. If there is a possible problem, the pupil and parent or legal guardian shall be notified and a recommendation made for a medical examination.
5. A pupil who fails to respond to any one frequency in either ear shall be screened again in four to six weeks.
6. If a pupil fails to respond to the same frequency or frequencies in the same ear on the second valid screening, the pupil shall be considered to have failed the screening.
7. A pupil who fails to respond at a different frequency or different frequencies on the second screening shall be screened a third time within two weeks.
8. A pupil who fails to respond at any one frequency on the third screening shall be considered to have failed the screening.
9. The school nurse shall notify in writing the parent or legal guardian of any pupil failing auditory or audiometric screening of the necessity for additional evaluation by a physician or family health care provider.

D. Vision Screening N.J.A.C. 6:29-2.1(d)

Vision screening shall be conducted as follows:

1. The accepted method of screening will be the T.O. machine for vision screening or the Snellen Screening Chart.
2. Pupils who fail to read less than 20/40 in one or both eyes shall be retested. Pupils who fail a subsequent test shall be referred for definitive diagnosis and treatment, following notification of parent or legal guardian.
3. All pupils in grade 5 and all pupils admitted to this district after grade 5 will be tested for color blindness.

E. Tuberculosis Screening N.J.A.C. 6:29-2.3

Screening for tuberculosis infection will be conducted as follows:

1. The only pupils who shall be tested are those in grades and schools identified or under circumstances specified by the State Department of Health based upon the high incidence of tuberculosis or reactor rates in the communities or population groups concerned.
2. The Mantoux intradermal tuberculin test using five T.U. (Tuberculin Units) of PPD tuberculin shall be the only skin test used to detect evidence of tuberculosis infection.
3. A pupil shall be exempt from these requirements upon presentation of documentation of from a licensed physician showing a significant tuberculin reaction and a subsequent negative chest X-ray.
4. Procedures for the administration of the Mantoux test, interpretation of tuberculin reactions, follow-up procedures (including a chest X-ray and medical evaluation) and reporting shall be conducted in accordance with the Department of Health's Reference Guide for Physicians and Nurses.
5. All pupils referred for the necessary chest X-ray and medical examination shall submit a physician's report. If the physician's report is not received by the school medical inspector within four weeks, or if the school medical inspector is unwilling to accept the findings, the pupil shall have a chest X-ray examination in the manner prescribed by the Board of Education.

F. Athletic Examinations

Athletic examinations will be conducted in accordance with Regulation No. 2431.1 and N.J.A.C 6:29-3.4 and N.J.S.A 18A:40-41.7.

G. Substance Abuse Examinations

Examination of pupils suspected of substance abuse will be conducted in accordance with Regulation No. 5530 and N.J.A.C. 6:29-6.5.

H. Child Study Team Evaluations

The school district shall ensure that pupils receive medical examinations for the purposes of the comprehensive Child Study Team evaluation. Examination of pupils identified as potentially educationally disabled will be conducted in accordance with Regulation No. 2460 and N.J.A.C. 6:28-3.4.

I. Pediculosis Examinations

Pediculosis (head lice) examinations will be conducted in accordance with procedures determined by the school medical examiner.

J. Records

Records of all physical and health examinations will be kept as follows:

1. The results of examinations will be recorded on a record form recommended by the Commissioner of Education. Such form shall be kept in a permanent file and shall be the property of the Board. The original health record shall be forwarded with other school records of pupils who transfer to another school district within the State of New Jersey; a photocopy will be retained in this district. A photocopy of the health record shall be forwarded with other school records of pupils who transfer to an out-of-State school; the original will be retained in this district. If a pupil leaves for any other reason, the record shall remain the property of the school.
2. The maintenance of health records is primarily the responsibility of the school nurse.
3. Pupil health records are subject to N.J.A.C. 6:3-6.1 et seq. and Policy No. 8330 on pupil records generally and must be kept confidential. Access is permitted only to the pupil's parent /guardian, the adult pupil and professional staff members charged with educational responsibility for the pupil. Aides and school office personnel may have access to health records only under direct supervision of a professional staff member and only to the extent necessary to enter and record data.

K. Notification of Parents

The results of physical and health examinations shall be reported to the parent /guardian of the pupil examined, along with any recommendation of the school medical inspector or school nurse regarding possible treatment.

In Effect: November 13, 2001
Revised:

5410 PROMOTION AND RETENTION

The curriculum of the Westfield Public Schools is aligned with the Standards adopted by the State of New Jersey which sets minimum standards for all pupils. In addition to meeting basic State Standards, the curriculum is designed to provide an advanced level of proficiency for all pupils. The curriculum is organized by grade levels and subject areas in a sequential manner building on the skills learned in previous grades.

Promotion

Satisfactory completion of grade level curriculum is the basic criterion by which a pupil is advanced to the next level. Required proficiency at a grade level shall be based on the Standards adopted by the State of New Jersey and the performance standards set by the district.

Retention

Retention describes the process whereby a pupil is not promoted to the next grade level. It does not include high school pupils who fail to earn credit in one or more courses and require additional years to graduate.

The retention of pupils is generally not an effective means of meeting district standards. If a child is not meeting minimum proficiency standards, retention may be considered in exceptional circumstances such as frequent absence, and the maturity level of the child. In no case will a child be retained without the approval of the parent.

Pupils who are retained will have a specific educational plan developed to remediate problems that caused academic failure.

N.J.S.A. 18A 35-4.9

Approved: June 26, 2004

First Reading: December 5, 2017

Second Reading: January 4, 2018

R 5410 PROMOTION AND RETENTION

Grades K-5

Pupils will be placed at the grade level to which they are best adjusted academically, socially and emotionally. Pupils will normally spend one year at each grade level.

Retention

Retention is generally not an effective strategy to enable pupils to meet minimum standards. Pupils who fall below grade level expectations should be reviewed by the Intervention and Referral Services (I&RS) team and alternative strategies developed. These might include basic skills assistance, a modified instructional program, additional instructional time and referral to the Child Study Team for resource center placement. Retention may be considered when a child is not meeting minimum proficiency levels in reading and math under one or more of the following circumstances:

1. The child has been absent for over 20% of the school year
2. The child is immature socially and the retention would not cause undue social and emotional adjustment.
3. The parents request the retention.

Whenever retention is being considered the teacher will confer with the parents, the I&RS Team, the Child Study Team, where applicable, and the building principal. The building principal will then make a recommendation to the Superintendent of Schools who will have final approval.

Grades 6 through 8

Intermediate pupils are expected to successfully complete course requirements in English, Mathematics, Social Studies, Science, Foreign Language and Physical education.

Course Failures

When a pupil fails one or more subjects he/she will be expected to make up the course requirements by attending a summer school, through tutoring and passing a make-up exam or assignment. If the pupil is unable to demonstrate proficiency in the failed course the principal may require that the pupil repeat the course in the following year.

Pupils who are unable or unwilling to meet course requirements in two or more subjects will be referred to the Child Study Team or I&RS Team and a modified program will be developed. Pupils who are at risk of failing the 8th grade proficiency assessment will be given basic skills assistance.

**PROGRAM
R 5410
Promotion and Retention**

Page 2 of 2

Grades 9 –12

Regular education pupils are required to meet all of the requirements of the State of New Jersey as well as the requirements of the district in order to earn a high school diploma. When a pupil fails a required course they will demonstrate proficiency by attending a summer school or through tutoring and passing a make-up exam. Pupils may also be required to repeat the course in the following school year.

Pupils are required to meet the New Jersey Department of Education graduation requirements under N.J.A.C. 6A:8-5.1.

In Effect: June 26, 2004

Regulations Follow

Page 1 of 1

5420 REPORTING PUPIL PROGRESS

The Board of Education believes that the cooperation between school and home in the interests of children is fostered by the systematic communication of pupils' educational welfare to parents or legal guardians. The Board directs the establishment of a program of reporting pupil progress to parents or legal guardians by both written reports and by parent-teacher conferences and requires the cooperation of all appropriate teaching staff members in that program as part of their professional responsibilities.

The Superintendent shall develop, in consultation with appropriate teaching staff members, procedures for reporting pupil progress to parents or legal guardians that utilize various methods of reporting appropriate to grade level and curriculum content; ensure that the pupil and parent or legal guardian receive ample warning of a possible failing grade or any grade that would adversely affect the pupil's educational status; enable the scheduling of parent-teacher conferences at such times as will ensure the greatest degree of participation by parents or legal guardians; and require the issuance of report cards at intervals of not less than four times per year, except in kindergarten where they will be issued two times.

Reports of individual achievement on state assessment and standardized tests shall be promptly made available to the pupil or the pupil's parent or legal guardian.

N.J.A.C. 6:8-7.1

Approved: August 27, 2002
First Reading: December 5, 2017
Second Reading: January 4, 2018

R 5420 REPORTING PUPIL PROGRESS

A. Purpose

The purpose of reporting the educational progress of pupils is to:

1. Inform parents or legal guardians of the progress children have made in school;
2. Apprise pupils of their progress in school;
3. Prompt teachers to make periodic, formal assessments of each pupil's progress;
4. Provide a cumulative record of a pupil's progress through the educational system, upon request; and
5. Foster a growth mindset while providing students with an accurate sense of his or her academic, social, and physical development.

B. Frequency

1. Report cards will be issued four times per year except in kindergarten where they will be issued two times.
2. The schedule of dates on which report cards will be issued will be published in the school calendar.
3. Parents or legal guardians and pupils will be notified of a failing grade at the mid-point of the marking period.
4. Nothing in this regulation should discourage teachers from implementing various forms of communication, as frequently as the circumstances dictate, to keep parents or legal guardians informed of the educational progress of their children.

C. Report Card Form

1. The form of report cards will be periodically reviewed by the Superintendent or designee in order to insure that report cards effectively and accurately report pupil progress.
2. Grades will be determined in accordance with Regulation No. 2624.
3. At the elementary level, report cards will report individual academic, personal, and social growth as well as work and study habits.
4. At the middle school and high school levels, report cards will record pupil achievement as well as comments about pupil academic and personal growth and development, when appropriate.
5. Report cards at all levels will record the pupil's absences and tardiness.

In Effect: August 27, 2002
Revised: