DoDEA School Health Services aims to optimize learning by fostering student wellness. The school nurse serves as the health service expert, providing health care to students/staff and implementing interventions that address both actual and potential health and safety conditions. The school nurse collaborates with the school administrator to promote the health and academic success of students and serves as the liaison between the school, community, and health care systems. This collaborative effort creates opportunities to build capacity for students' self-care, resilience, and learning.

The school nurse's responsibilities include:
1. Providing leadership in promoting personal and environmental health and safety by managing communicable diseases, monitoring immunizations, and providing consultation and health-related education to students and staff to promote school health and academic success;
2. Providing quality health care and intervening with actual and potential health problems through health screenings, health assessments, and nursing interventions, including the development of health care and emergency care plans to enable students to safely and fully participate in school;
3. Providing case management services to direct care for students with chronic health conditions in order to ensure their safety and increase their access to the educational program; and
4. Collaborating with school and community-based resources to reduce health-related barriers to student learning, improve access to health care and develop school-community partnerships to support academic achievement and student success.

Related regulations

School Health Services

Parent Notification

This applies to:

All schools

Modification date

Sat, 12/30/1899 - 12:00

This policy is under review

As a general rule, the parent or sponsor will be notified by the school administrator or school nurse if a child has:

1. Any illness or injury that causes concern or inability to participate in school activities;
2. Eye, ear, or teeth injuries;
3. Head injury;
4. Second- or third-degree burns;
5. Severe pain;
6. Sprains or possible fractures;
7. Temperature greater than or equal to 100 degrees Fahrenheit;
8. Vomiting or diarrhea; and
9. Wounds that may require stitches.

Related regulations
Do not send your child to school if he or she is ill. Staying home to get the proper rest, nutrition, and parental care is for your child's benefit as well as for the benefit of the other children in the school who may be unnecessarily exposed to a contagious illness. The following are examples of when a student should remain home:

1. A temperature greater than or equal to 100 degrees Fahrenheit. The student must be fever-free without the use of fever-reducing medication for 24 hours (a complete school day) before returning to school.
2. Actively vomiting or has diarrhea.
3. An illness which presents with contagious symptoms.
4. Other symptoms interfering with learning or participation, such as abdominal pain; ear ache; itchy, painful eyes; light-sensitivity; or profuse exudate from the eyes necessitating frequent wiping.
5. Severe uncontrolled coughing or wheezing, rapid or difficult breathing, and coughing lasting longer than five to seven days.
6. Episodes of vomiting in the past 24 hours. A student must remain home until vomiting resolves (no further vomiting for 24 hours).
7. Frequent, loose or watery stools compared to the student’s normal pattern; not caused by diet or medication. A student must remain home if a) he/she looks or acts ill; b) he/she has diarrhea with temperature elevation of 100°F or greater; and c) he/she has diarrhea and vomiting.
8. Blister-like lesions (impetigo, including streptococci, staphylococcus, and methicillin-resistant staphylococcus aureus infections) that develop into pustules with weeping and crusting. A student must be medically evaluated, remain home for at least 24 hours after initiation of medical treatment and remain home until determined not infectious by a medical provider. Lesions must be covered for school attendance.
9. Ringworm lesions must be covered for school attendance.
10. Thick discharge from eye, necessitating frequent wiping and may be accompanied by pain, redness to the white part of the eye and light sensitivity. Student must remain at home until symptoms clear or completion of 24 hours of medical provider-prescribed ophthalmic treatment.
11. Measles, mumps, rubella, (German measles), chicken pox, pertussis (whooping cough), and influenza. A student must remain home until determined to be not infectious by a medical care provider.

If your child becomes ill during the school day, the school nurse will contact you to pick up your child. To return to school, your child must be without symptoms for 24 hours and fever-free without fever-reducing medications for at least 24 hours.

Related regulations

Medication at School

This applies to:

All schools

Modification date

Fri, 06/23/2023 - 12:00

This policy is under review

Off
When medication must be administered during the school day, it must be delivered to the school nurse in the original container and properly labeled by the pharmacy or primary care manager/provider, stating the name of the student, the medication, dosage, route, time of administration, and current date of issue. Contact the school nurse for the required Medication Consent Form. This form must be filled out and signed by the prescribing state licensed medical provider and also signed by the sponsor/parent/guardian. The sponsor/parent/guardian needs to bring the signed form and the medication to the school nurse. If the school nurse is not present, the signed form and medication must be presented to the school principal, acting principal, or health aide for safekeeping. It is acceptable for parents to bring in self-purchased over-the-counter medication to be kept in the health office for their child's use at school, but the medication must be accompanied by a physician's prescription and signed parental consent form.

In some rare situations, students are allowed to keep their rescue or emergency medicine with them while in school or at school-related activities. The prescribing primary care manager must provide a written statement that the student must be in control of his or her medication due to a life-threatening medical condition. The parent must provide written consent for the medication to stay with the student. See the school nurse to obtain the appropriate form for medications to be administered during school hours or for a student to self-carry emergency medication.

**Related regulations**

**Allergies and Chronic-Acute Conditions**

**This applies to:**

All schools

**Modification date**

Fri, 06/23/2023 - 12:00
This policy is under review

Off

Please inform the school nurse of any medical condition and health concerns your child may have to better serve and protect your child's welfare in accordance with DoDEA Regulation 2720.1, "First Aid and Emergency Care," September 8, 2003.

Food allergies (including peanut/nut allergies) are a significant health concern within the school environment. Allergic reactions can range from mild symptoms to life-threatening reactions. Ensuring a safe environment for all students and visitors is a primary focus for the school administration and staff. In an attempt to raise awareness and limit unnecessary exposure during school hours, the following steps have been implemented to address food allergies:

1. Notify the school nurse of ANY allergy to food, drug, insects, etc., that your child may have;
2. Provide the school nurse with medication/doctor's orders/emergency care plan/parent permission form;
3. Teach children at home about their food allergies and the importance of not sharing any food with others in school or elsewhere; and
4. Notify the classroom teacher about your child's allergens and check with the classroom teacher prior to bringing in any food for classroom celebrations.

Related regulations

2720.1: First Aid and Emergency Care

Immunization Requirements

This applies to:

All schools
Students who enroll in DoDEA schools are required to meet specific immunization requirements (DoDEA Regulation 2942.01, "School Health Services," September 2, 2016). These requirements represent the minimum and do not necessarily reflect the optimal immunization status for a student. Acceptable forms of official proof of immunization status may include, but are not limited to:

1. Yellow international immunization records;
2. State agency-generated immunization certificates;
3. School-generated immunization certificates; and
4. Physician, clinic or hospital-generated immunization records.

It is the responsibility of the sponsor/parent/guardian to provide their child's most current immunization record at the time of enrollment and when immunizations are updated. Parents of incoming students are allowed up to 30 days from the date of enrollment to obtain documentation of any missing required immunization(s). If the missing required immunization is a series, then the first dose of the series must be administered, and documentation must be provided to the school within the required 30 days. Students who have immunization(s) due during the school year will have 10 calendar days from the due date to receive their vaccine(s) and to submit documentation to the school. The due date of a vaccine is on the date the student reaches the minimum recommended age for vaccine administration.

**STUDENTS IN NON-COMPLIANCE AFTER 10 DAYS MAY BE DISENROLLED UNTIL PROOF OF COMPLIANCE OR APPROVED EXEMPTION IS PROVIDED.**

Related regulations
School personnel will administer first aid as efficiently as possible to the dependent student when needed to treat minor injury or illness, in accordance with the DoDEA Regulation 2720.1, "First Aid and Emergency Care," September 8, 2003. In accordance with Section 6 of DoDEA Regulation 2720.1, should a student sustain a more serious illness or injury, the school nurse will make a judgment call based on nursing assessment to determine if the student needs emergency medical care requiring a response by an emergency medical team (EMT) and possible transportation for treatment at a health care facility. If a student needs emergency medical care requiring an ambulance, the school will make reasonable efforts to contact the sponsor/parent/guardian or emergency contact. In the absence of a parent, a school administrator or designee may accompany the student to the medical treatment facility.

The EMT, health care facility, or attending health care provider(s) may be non-U.S. or non-military facilities or providers, especially if the dependent student is located overseas. Treatment decisions will be made exclusively by the health care provider(s) if the nature of the dependent student's injury or illness requires immediate health care, in accordance with their standard operating procedures regarding the delivery of emergency care for the
dependent student.

It is very important for the school to have a current address, home phone number, mobile phone numbers, duty phone number, and the phone number of another adult to act as emergency contact in case parents cannot be contacted.

Contact your school nurse for additional information regarding the DoDEA School Health Services Program.

Related regulations

2720.1: First Aid and Emergency Care

School Meals Program

This applies to:

All schools

Modification date

Fri, 06/23/2023 - 12:00

This policy is under review

Off

The DoDEA School Meals Program (SMP) supports academic achievement by providing nutritious meals to your students through the National School Lunch Program and School Breakfast Program.

- The School Meals Program is a budget friendly and convenient program for parents that can save time, energy, money and reduce stress.
- Households must reapply every school year for free and reduced-price meals, beginning no earlier than July 1st.
- All meals must be paid for in advance or at the point of sale.
- A best practice is to fund your child’s account every pay day through the next pay day.

Visit your school's School Meals Program page for more information and the latest school menus.

Related regulations

1015.5: DoD Student Meal Program

Ft. Liberty Wellness Policy
This applies to:

Fort Liberty Schools

Modification date

Sat, 12/30/1899 - 12:00

This policy is under review

Off

The NC: Fort Liberty District Schools (FLS) believe that children and youth who begin each day as healthy individuals can learn and achieve more readily and are more likely to complete their formal education. FLS also believes that healthy staff can more effectively perform their assigned duties and model appropriate wellness behaviors for students. This policy encourages a holistic approach to staff and student wellness that is sensitive to individual and community needs.

It is the policy of FLS that the following goals be met:

- FLS will engage students, parents, school principals, administrators, school board members, child nutrition services, health professionals and other interested community members in developing, monitoring, reviewing, and reporting the effectiveness of district-wide nutrition and physical activity policies.
- All students in grades PK-12 and school staff will have opportunities, support, and encouragement to be physically active on a regular basis.
- Foods and beverages served or sold at school will meet the nutrition recommendations of the U.S. Dietary Guidelines for Americans.
- Qualified child nutrition professionals will provide students with access to a variety of affordable, nutritious, and child-pleasing foods that meet their health and nutritional needs. Schools shall provide clean, safe, and pleasant settings and adequate time for students to eat.
- All FLS will participate in the National School Breakfast and Lunch Programs and the Summer Food Service Program (Fresh Fruit and Vegetable Program upon eligibility and USDA selection). Schools will provide nutrition awareness activities and physical education to all students.
- All FLS will be registered as USDA Team Nutrition Schools.

Related regulations

On this page

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