



Bear Creek   
COMMUNITY CHARTER SCHOOL

# Parents Guide to School Health Services

2023-2024



[www.bearcreekschool.com](http://www.bearcreekschool.com)



## CONTACT INFORMATION

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### Attendance

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## *Introduction*

Dear Parents:

Welcome to another exciting year at Bear Creek Community Charter School! In an effort to provide you with valuable information about Student Health Services, we provide parents/guardians of all students a copy of this booklet. We hope you find this information useful, convenient, and easy to understand.

Healthy children learn better. We all know this on a common sense level, but scientific data backs it up. Research suggests that students' health and learning are inextricably linked. Studies also have shown that school health programs can boost students' academic performance and improve behavior and attendance. So, efforts to increase student achievement should include a focus on health.

The Pennsylvania Public School Code provides that all children attending public, private, and parochial schools receive school health services. The fundamental purpose of school nursing is to help students participate fully in their learning by preventing, removing and/or reducing health related barriers that interfere with their development and learning.

Please don't hesitate to contact me if you have any questions or if I can be of any assistance to you in the future. I can be reached via e-mail at [tina.vojtko@bearcreekschool.com](mailto:tina.vojtko@bearcreekschool.com) or by telephone at (570) 820-4070, extension 6106.

*Tina Vojtko, RN*  
School Nurse

## HEALTH & ILLNESS POLICY

It is the philosophy of the Bear Creek Community Charter School to provide school health services as part of its overall program for student services. These services shall be available to all students enrolled at Bear Creek Community Charter School .

We ask that you report any and all communicable diseases to the school nurse. These include chicken pox, strep throat, head lice, mononucleosis, impetigo, ringworm, scarlet fever, pink-eye, fifth disease, pinworms and scabies. Your cooperation is appreciated.

We cannot exclude a child from recess or physical education class unless he/she presents a note from a health care provider stating the specific limitations to be placed on his/her activities.

Your child should not attend school in the following situations:

Diarrhea/Vomiting: A student with diarrhea and/or vomiting should stay home and return to school only after being symptom free for twenty-four (24) hours.

Fever: The student should remain home with a fever of 100 degrees or greater. The student can return to school after he/she has been fever free for twenty-four (24) hours with out fever reducing medication such as Motrin or Tylenol. Any child with a fever of 100 degrees or higher at school will be sent home.

Rashes: Common infectious diseases with rashes are most contagious in the early stages. A student with a suspicious rash should return to school only after a health care provider has made a diagnosis and authorized the student to return to school.

Pink-Eye (conjunctivitis): A student with red eye(s) and white, green or yellow discharge must be excluded from school until evaluated by a health care provider. If there is a diagnosis of pink-eye and the student is given antibiotics, the student may return to school after being on the antibiotic twenty-four (24)hours.

Strep Throat: After a diagnosis of strep throat, the student may return to school after twenty-four (24) hours of antibiotic treatment.

Each situation will be assessed individually, and in some cases, the School Nurse will choose not to attempt to remove the tick. In this situation, the parent of the student will be notified and be asked to come to the school to take the student to seek medical care from the family's primary care physician.

For information visit online:

Pennsylvania Department of Health: <http://www.health.state.pa.us/epidemiology/disfact/lyme%20disease.htm>

Centers for Disease Control & Prevention:  
<http://www.cdc.gov/ncidod/dvbid/lyme/index.htm>

Penn State University College of Agricultural Sciences:  
<http://ento.psu.edu/extension/factsheets/ticks>



## IMPORTANT INFORMATION FOR PARENTS ABOUT TICKS

Bear Creek Community Charter School is located in a rural area that is endemic to ticks. Ticks are generally found in wooded or brushy areas, on the edge of hiking or animal trails, or the edge of a lawn where it meets a wooded or brushy area. In Pennsylvania, the peak time of year for exposure to the nymphal stages of ticks that are actively seeking hosts is April through July. There are various health concerns related to tick exposure, including the potential for Lyme disease.



The risk of being bitten by a tick can be decreased by using the following precautions:

- Wear light color clothing so ticks can be spotted more easily;
- Avoid wearing shorts when active outdoors in areas where ticks are active;
- Tuck pant legs into socks or boots, and shirts into pants; and
- Wear a hat, long sleeved shirt, and long pants for added protection.

During the months of March and April of each school year, Ms. Longo will be providing instruction to all students on precautions related to tick exposure as part of Environmental Education.

In the event a tick attaches itself to a student at Bear Creek Community Charter School, the student will be directed to the School Nurse for assessment.

Depending upon the location of the tick attachment and other factors, the tick may be removed from the student. The School Nurse will clean the area of attachment with alcohol. The School Nurse will notify the student's parent. Parents of students who have been bitten by ticks are urged to consult with their primary care physician for additional medical follow-up.

## EMERGENCY CONTACT INFORMATION

It is imperative that Bear Creek Community Charter School have the most current contact information for student's parents/guardians on file at all times, along with current contact information for other designated individuals (family members, etc.) who the School can contact in an emergency if they can't reach a student's parents or legal guardians.

Not having the most current contact information is a challenge for the School, and we need the help of parents and legal guardians in ensuring our information is accurate. This information is used in the event of medical emergencies, transportation issues, etc.

Please be sure you update your child's Parent Portal account online with your current information - - - for not only parents and guardians, but for other emergency contacts too. If your numbers change throughout the year, please don't forget to log into Parent Portal and update the information.



<https://bearcreekschool.powerschool.com/public/>

## HEAD LICE

Bear Creek Community Charter School conducts screenings of all students for head lice twice each year, as well as on an as-needed basis. Screenings are conducted individually, in a private setting. If a student is found with nits or active head lice, the School Nurse will contact the parent by telephone and the student will be sent home. Students are permitted to return to school after one treatment. Upon return, the student must report to the School Nurse for an additional screening. Bear Creek Community Charter School reserves the right to restrict a student's return to school based upon the outcome of treatment and the results of screening procedures.

## STUDENT MEDICATION

In keeping with recommendations of the American Medical Association and the Pennsylvania Department of Education, Bear Creek Community Charter School discourages the administration of medication at school. Realizing that under certain circumstances it will be necessary for students to take or be administered medications while at school, the following procedures shall be followed:

1. The parent or guardian must provide a written request for the administration of the prescribed medication at school;
2. Written orders are to be provided to the School Nurse from the private physician detailing the diagnosis or type of illness involved, the name of the drug, dosage, time of administration, and side effects. A separate authorization shall be submitted for each medication. The medication label does not take the place of a doctor's note;
3. The medication should be brought to the school by the parent/guardian in the original container, appropriately labeled by the pharmacy or physician. Do not send a student to school with medication;
4. Unused quantities cannot be sent home with the student and will be discarded the end of the school year unless picked up by a parent;
5. **Students are not permitted to carry medications with them in school or on a school bus** except in circumstances authorized by the School Nurse. Such exceptions include students with asthma or other potentially life-threatening illnesses who may self-administer when a Nurse is not physically present. Permission for such possession and self administration must be on file in the office of the School Nurse;
6. Over-the-counter medications will not be administered without a doctor's note;
7. The School Nurse is not authorized by the Commonwealth of Pennsylvania or the school's Board of Trustees to administer medication unless the above conditions are met;
8. When a student taking medication is scheduled for a class trip, the parent will be asked to accompany the class and administer the medication unless the School Nurse or another Registered Nurse is available to administer the medication.

## STUDENTS WITH SPECIAL DIETARY NEEDS

In providing food service to its students, Bear Creek Community Charter School shall not discriminate on the basis of disability.

Bear Creek Community Charter School shall make substitutions in foods for students who are considered disabled under 7 CFR Part 15b and whose disability restricts their diet. Bear Creek Community Charter School may also make substitutions for students without a disability who are unable to consume the regular lunch because of medical or other special dietary needs. Substitutions shall be made on a case by case basis only when supported by a statement of the need for substitutions that includes recommended alternate foods. Such statements shall, in the case of a student with a disability, be signed by a physician, or in the case of a student without a disability, by a recognized medical authority.

The following procedure will be followed when accommodating a student with a special medical or dietary need. The parent or guardian of the student will provide the School Nurse with a written statement (Care Plan) signed by a physician that includes the following:

1. The food items the student may not consume;
2. Recommended substitutions for which the student is permitted to consume;
3. Instructions relating to specific portion sizes;
4. The date on which the dietary substitution should begin;
5. The date on which the dietary substitution shall end, if applicable.



## Scoliosis Screening

Scoliosis is a lateral and rotary curvature of the spine, most commonly found during the adolescent growth period. It is estimated that approximately 4% of school-age children will have a curvature in varying degrees. The effect of scoliosis depends upon its severity, how early it is detected, and how promptly it is treated. The purpose of the screening program is to detect possible curvature of the spine in children. If the condition is detected early and appropriately treated, progressive spinal deformity may be prevented.

The screening test is very simple and can be performed in less than a minute. A trained screener will check the student's back by observing it while the student is standing and bending forward.

This is an annual screening for students in sixth and seventh grades.

Parents will be notified if there is any reason to have the student examined by the family's primary care provider for further evaluation.



Students in kindergarten through eighth grade are not permitted to bring medications of any type (cough drops, cough medications, over-the-counter medications, prescription drugs, etc.) to school except as outlined in above.

Students are not permitted to transport any type of medication on the school bus, in backpacks or lunch boxes. This includes cough drops, topical lotions, eye drops, throat lozenges, etc.

If medicine must be taken at certain intervals, the parent must assume responsibility of transporting the student's medication.

If you have any questions regarding this process, please contact Mrs. Tina Vojtko, RN at 820-4070, extension 6106.



## INHALERS & EPIPENS

Any child of school age that desires to possess and self-administer an asthma inhaler or Epipen in a school setting must demonstrate the capability for responsible behavior in the use of an asthma inhaler or Epipen to the parent and school nurse.

Students must have permission for carrying and taking the medication from physician, physician assistant, or certified nurse practitioner.

Students needing emergency medications such as asthma inhalers and/or Epipens should be prepared to have a care plan outlined by their physician involving parents and the school nurse. Meeting with the school nurse should be arranged prior to the start of the school year and during the school year on an as needed basis.

Written request from the parent/guardian that the school entity comply with the physician order and relieving the school entity or any school employee of any responsibility for the benefits or consequences of the prescribed medication when it is parent-authorized and acknowledging that the school entity bears no responsibility for ensuring that the medication is taken. Students may lose this privilege if the medication is misused or they fail to comply with this policy.

State law permits school personnel to administer emergency medications, such as Epipens, in life threatening situations.



## Dental Screening

Dental diseases are the most prevalent chronic conditions of children in the United States and the major cause of loss of teeth in children and adolescents. Dental diseases account for much pain and disruption of time and attention in school. Dental diseases untreated are progressively destructive of teeth, gums and bony supporting structures.

Dental disease is largely preventable by the practice of appropriate dental and oral hygiene care. Schools have played a considerable role in delivery of dental services to children from the earliest days of school health. The school dental health program in Pennsylvania is an integral part of the total school health program.

The mandated dental examination program represents the minimum dental health services which students in specified grades must receive. The dental examination provides baseline data for determining the dental health status of the pupil population served.

Parents/guardians are encouraged to have their family dentist perform the examinations and report the results of the examination on approved forms provided by the school and returned to the school to be included in the comprehensive school health record. Examinations done by the family dentist within four months prior to the opening of school are accepted for the required examination that year.

Annual dental screenings are required for students in kindergarten, first, third and seventh grades.

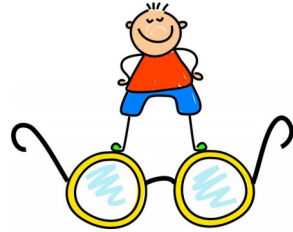
Please be prompt in returning the examination form so that the School Nurse can keep your child's school health record updated.





## Vision Screening

The purpose of a school vision screening program is to identify students with visual impairments. Visual problems can and do affect the educational, social and emotional development of children. Early detection of vision problems assures the child of the opportunity of taking the best advantage of his/her educational opportunities.



Ninety percent of all information is transferred to the brain via the eyes. Most vision problems are correctable, at least to some degree. Impaired vision is most damaging in primary grades because it is at these grade levels that the foundations for learning are taught. Those children with vision loss severe enough to require special educational opportunities must be identified early if they are to be helped.

Although it is recommended that every child have an eye examination very early in life, vision screenings continue to provide an important tool in the early detection of vision disorders in the pediatric population. However, the opportunity for vision screenings is not always afforded to every child in the early years of life. As attendance at school is mandated for all children in Pennsylvania, the school setting provides an accessible place where children may have their vision screened. It is possible for children in Pennsylvania as young as four to have their vision screened if they attend kindergarten.

Recognizing the above statements, vision screening has been rightly mandated for Pennsylvania school age children since 1957.

Students are screened annually in all grades. Results of vision screening will be provided annually to the student's parent or guardian.

The most important aspect of the screening program is referral with follow-up. The child who fails the screening should receive a comprehensive eye examination by an eye care specialist.

## **PENNSYLVANIA'S CHILDREN'S HEALTH INSURANCE PROGRAM**

CHIP is short for the Children's Health Insurance Program - Pennsylvania's program to provide health insurance to all uninsured children and teens who are not eligible for or enrolled in Medical Assistance. There are a lot of reasons kids might not have health insurance - maybe their parents lost a job, don't have health insurance at work or maybe it just costs too much. Whatever the reason, CHIP may be able to help.

Parents may think their kids can't get CHIP because they make too much money. Not true! CHIP covers all uninsured kids and teens up to age 19 who are not eligible for Medical Assistance. No family makes too much money for CHIP because there is no income limit. For many families, CHIP is free. Families with incomes above the free CHIP limits will pay low monthly premiums and co-pays for some services.

CHIP is administered by private health insurance companies that are licensed and regulated by the Pennsylvania Insurance Department and have contracts with the commonwealth to offer CHIP coverage.

Once enrolled, children are guaranteed 12 months of CHIP coverage unless they no longer meet the basic eligibility requirements. Families must renew their coverage every year in order for the coverage to continue. CHIP insurance companies send renewal notices 90 days before their benefits are going to end, and families must fill out and send the renewal information back to their CHIP insurance company in order for benefits to continue.

For more information on Pennsylvania's Children's Health Insurance Program, visit [www.chipcoverspakids.com](http://www.chipcoverspakids.com)

Figuring out insurance questions these days can be complicated, but applying for CHIP is simple. Knowledgeable, courteous counselors are available at 1-800-986-KIDS (TTY/TDD 1-800-451-5886) to assist you. A counselor will also help you sort through the information and can help you apply for CHIP and other social service programs.

## IMMUNIZATIONS

The Pennsylvania Department of Health requires children attending school, regardless of grade level (**all students**), to have received the following immunizations:

- Four (4) doses of TDP, DTaP , DT or Td Vaccine for protection against Tetanus and Diphtheria, with one dose administered on or after the child's fourth birthday;
- Four (4) doses of the Polio Vaccine, with the fourth dose on or after the child's fourth birthday and at least six months after the previous dose was given.
- Two (2) doses of Measles, Mumps, Rubella (usually given as MMR).
- Three (3) doses of Hepatitis B given at intervals recommended by physician;
- Two (2) doses of Varicella (chickenpox) or evidence of immunity.

On the first day of school, unless the child has a medical or religious/ philosophical exemption, a child must have had at least one dose of the above vaccinations to risk exclusion. If a child does not have all the doses listed above, needs additional doses, and the next dose is medically appropriate, the child must receive that dose within the first five days of school or risk exclusion. If the next dose is not the final dose of the series, the child must also provide a medical plan (red and white card) within the first five days of school for obtaining the required immunizations or risk exclusion.

If a child does not have all the doses, needs additional doses, and the next dose is not medically appropriate, the child must provide a medical plan (red and white card) within the first five days of school for obtaining the required immunizations or risk exclusion. The medical plan must be followed or risk exclusion.

For attendance in **Seventh Grade**:

- One (1) dose of Tetanus, Diphtheria, Acellular Pertussis (Tdap) on the first day of seventh grade.
- One (1) dose of Meningococcal Conjugate Vaccine (MVC) on the first day of seventh grade.

On the first day of seventh grade, unless the child has a medical or religious/ philosophical exemption, a child must have had the above vaccines or risk exclusion.

Any child attending a public or non-public school in Pennsylvania, who by virtue of his/her hearing threshold test results obtained by the School Nurse is found to be in need of a complete ear examination, is to be referred to the family's physician or usual source of care for medical evaluation. The family is responsible for arranging this examination and providing a written follow-up report from the physician to the School Nurse.

In the event the family requires financial assistance in obtaining the examination through the Department of Health's Hearing Services Program, the School Nurse may provide the family with the toll-free telephone number (1-800-986-4550 or 1-800-986-KIDS) to obtain an Application for Services Packet.



## Hearing Screening

The purpose of the school hearing screening and threshold testing program is to identify children with hearing impairments. Results of hearing screening program have shown that five to ten percent of the school age population do not pass audiometric tests. The majority of these children are in need of medical treatment. Such treatment may result in restoration of hearing and prevention of permanent hearing impairment.

Communication is an integral part of human behavior. Seldom does one consider the implications of not being able to hear. The most serious effect of a hearing loss is the interference with and breakdown of communication between persons. In a child, some of the consequences may be:

1. Interference with normal speech and language development;
2. Development of abnormal social growth and behavior.;
3. Interference with education and human potential;
4. Development of adjustment problems in the child and his/her family;
5. Isolationism in a hearing world.

A child's behavior in the classroom may indicate the possibility of a hearing loss. The child may be inattentive, may ask for frequent repetitions, or his/her achievement may be low. The observation of such behavior will assist in identifying children in need of help and indicate the need to assess hearing levels.

While it is extremely important to conduct hearing tests on the young, school age student to ensure early identification of those with hearing loss and for hearing conservation purposes, it is equally important to conduct hearing tests on the older adolescent. The older student is less likely to complain of ear or hearing problems than a younger child; the impact on their ability to perform can be as detrimental as on a young child.

# NOTICE

School health officials will review the child's immunizations to verify the child meets the standards set by the Pennsylvania Department of Health. If a child's immunization records does not meet state requirements, the child will not be permitted to attend school.

If a child is exempt from immunization, he/she may be removed from school during an outbreak.



## SCHOOL HEALTH SCREENING PROGRAMS

Pennsylvania Public School Code of 1949, Section 1402(a) states that each child of school age shall be given vision and hearing tests, a measurement of height and weight, and such other tests as the Advisory Health Board may deem advisable to protect the health of the child.

### Body Mass Index, Height & Weight

The Pennsylvania Public School Code states that height and weight measurement shall be conducted at least once annually. Every effort shall be made to determine the pattern of growth for each child so that his weight and height can be interpreted in light of his own growth pattern rather than those of his classmates.

Nutrition is recognized as a critical factor in the promotion of health and the prevention of disease. Moderate malnutrition can have lasting effects on children's cognitive development and school performance. When children are hungry or undernourished, they have difficulty resisting infection and therefore are more likely than other children to become sick, to miss school, and to fall behind in class. They are irritable and have difficulty concentrating; and they have low energy levels. Unhealthy eating patterns may result in under-nutrition, iron deficiency anemia, and overweight and obesity.

Overweight and obesity in children and adolescents represents one of the most challenging conditions to treat. Yet intervention is necessary as recent data from the National Center for Health Statistics (NCHS) indicates approximately one in five children in the United States is overweight, a statistic that has doubled in the last three decades. Overweight is associated with an increased incidence and prevalence of hypertension and diabetes mellitus before and during adulthood as well as with the later development of cardiovascular disease in adults (Krauss, et al. 2000).

DEPARTMENT OF  
HEALTH

In early 2003, the Department of Health unveiled the Pennsylvania Nutrition and Physical Activity Plan to Prevent Obesity and Related Chronic Diseases. One of the goals of this plan is to increase parent/guardian awareness of the BMI-for-Age measure as a screening tool to assess growth patterns in children and youth. BMI is a weight for stature index that can be used to help determine whether the student is within a normal growth pattern, overweight, at risk of becoming overweight or underweight.

Growth screening enables school health professionals to monitor growth and development patterns of students and identify students who may be at nutritional risk or who may have a common nutritional problem.

Students will be weighed and measured in a setting that provides privacy. Confidentiality is always important and care is taken to ensure that findings are not accessible to other students or shared with staff.

Parents can request this information at any time by contacting the School Nurse and can then share findings with the student's health care provider for further evaluation and intervention, if necessary.

### Annual Physical Examinations

Annual physical examinations are required for students entering Kindergarten, first and sixth grades. We encourage parents to obtain a copy of the physical forms from the School Nurse and take them to the student's family physician to be completed. Copies of the physical form and all other school health forms are available on the School's web site at [www.bearcreekschool.com](http://www.bearcreekschool.com) - click on Student Health Services.

