STUDENTS WITH DISABILITIES NOTICE OF **RECORDS DESTRUCTION**

The division retains records of students with disabilities for a period of five (5) years after the student graduates, completes a Board of Education program, transfers, or withdraws from school. Roanoke City Public Schools makes a reasonable effort to notify parents of children with disabilities prior to the destruction of any records in accordance with federal code 34 CFR300.624. Notification will be made fifteen (15) working days prior to records destruction through The Roanoke Times. Prior to destruction, notification is also provided on the division's website.

SERVICES FOR STUDENTS IDENTIFIED AS **DEAF, HARD OF HEARING, OR VISUALLY** IMPAIRED

Each school board shall annually post information distributed by the Department of Education describing the educational and other services available through the Virginia Department of the Deaf and Hardof-Hearing and the Virginia Department for the Blind and Vision Impaired to the parents of those students who are identified as deaf, hard of hearing or visually impaired. School boards must also inform the parents

of the availability of the information and ensure that packets of the information are available in an accessible format for review by parents who do not have Internet access. VA Code 22.1-217.01.

SPECIAL EDUCATION

Roanoke City Public School's Child Find process helps to identify potential special education needs and educate the community about Child Find. Theimportance of Child Find in early intervention for children who may need services is critical. Roanoke City Public Schools will maintain an active and continuing child find program designed to identify. Locate and evaluate children residing in this jurisdiction who are two through 21 years of age, inclusively, who are in need of special education and related services. These shall include the following:

- · Children who are highly mobile, such as migrant and homeless
- Children who attend private schools, including children who are home instructed or home-tutored
- Children who are suspected of being in need of special education and related services though they are advancing from grade to grade; and
- Children who are under age 18 who are



suspected of having a disability

- Children who under age 18 and need special education and related services
- Children who are incarcerated in a regional or local jail in this jurisdiction for 10 or more days
- Children who are living in nursing homes Roanoke City Public Schools will coordinate Child Find activities for infants and toddlers birth to age two, inclusively) with the Part C local interagency coordinating council Roanoke City Public Schools conducts a public awareness campaign to inform the community of all persons, ages birth to 21 inclusively, rights to a free and appropriate public education and the availability of special education services.

Please refer children that may need to be considered for special education services to the Early Childhood Special Education Coordinator at (540) 853-1438. Contact may also be made to the principal of the school your child attends or the Director of Special Education at (540) 853-1437. The name of the school in your school zone area is listed in the telephone book. You may also access www.rcps.info for more information on Special Education programs.

MEDICAL AND HEALTH INFORMATION

MEDICATION POLICY

Roanoke City Public Schools encourages medication to be administered at home, if possible. When medication is needed during school hours, the following procedures must be followed:

- Prescription medication must be in the pharmacy labeled container with the student's name and dosing instructions. There must also be a completed Medication Permission Form with the doctor's orders, doctor's signature, and written parental permission. If the medication is not in the pharmacy labeled container, the Medication Permission Form is incomplete or there is a discrepancy, medication cannot be given.
- Over-the-counter (OTC) medications must

be in an unopened, sealed, original labeled container. The parent must complete a Medication Permission Form with specific dosing instructions. OTC medications may not be given outside the manufacturer's label directions or on a routine basis without a doctor's order. OTC medications include not only oral medicines, but also preparations that may be applied to the outside of the body.

- Medications are usually kept in the school office or clinic. Medications must be brought to and from school by an adult. not the student.
- Medication Permission Forms are only good for one school year and must be completed at the beginning of each school year.
- Due to the lack of standards for preparation, dosage, potency, and use, alternative or herbal preparations and nutritional supplements will be treated as prescription medications.
- Only the school nurse, principal or principal's trained designee may administer medication at school.
- Verbal orders cannot be accepted by school personnel.
- Medication orders will be reviewed by the school nurse. If there is a discrepancy or reason to suspect a child may be compromised by a medication, the medication will be held until there is a resolution.
- If your child has a health condition and needs to carry and self-administer a medication such as an inhaler or autoinjectable epinephrine, please contact the school or school nurse for further instructions.
- Medications not picked up at the end of the school year will be destroyed.

Information for parents explaining the medication procedure and the Medication Administration Permission Form may be found on the Roanoke City Public Schools website at www.rcps.info/studentservices on the Student Health Services page. These documents are also available at each school.

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HEALTH SCREENINGS

In accordance with state requirements, students new to Roanoke City PublicSchools and students at specified grade levels receive health screenings. Screenings may include

one or more of the following: hearing, vision, speech, voice, language, dental, height, weight, fine/gross motor function. Student Support Teams may also request screenings.

POSSIBLE EXPOSURE TO VIRAL INFECTIONS

Whenever any School Board employee is directly exposed to or exposes other persons to body fluids in a manner which may, according to current guidelines of the Centers for Disease Control, transmit HIV or the Hepatitis B or C virus, the person whose body fluids were involved in the exposure shall be deemed to have consented to testing for infection with HIV or Hepatitis B or C. Such persons will also be deemed to have consented to the release of such test results to the persons exposed.

Upon notification by a school employee who believes he/she has been involved in a possible exposure-prone incident, which may have exposed the employee to the blood or body fluids of a student, the Superintendent shall contact the local health director who, upon immediate investigation of the incident, shall determine if a potentially harmful exposure has occurred and make recommendations based upon all information available to him or her regarding how the employee can reduce any risks from such exposure.

The Superintendent shall share these recommendations with the school employee.

The Superintendent and the school employee shall not divulge any information provided by the local health director regarding the student involved except as described below. The information provided by the local health director shall be subject to any applicable confidentiality requirements set forth in Section 32.1-35 et seq. of the Code of Virginia. If the person is a minor, consent for testing shall be obtained from the parent, guardian, or person standing 'in *loco parentis*' (meaning in the place of a parent) of such minor prior to initiating such testing. If the parent or guardian or person standing in the place of a parent withholds such consent, the school board may petition the juvenile and domestic relations district court in the county or city where the minor resides for an order requiring such testing.

Except if the person to be tested is a minor, if the person whose blood specimen is sought for testing refuses to provide such specimen, any person potentially exposed to the human immunodeficiency virus or hepatitis B or C viruses, or the employer of such person, may petition the general district court of the county or city in which the person whose specimen is sought resides or resided, or, in the case of a nonresident, the county or city where the school board has its principal office, for any order requiring the person to provide a blood specimen or to submit to testing and to disclose the test results in accordance with this section.

At any hearing before the court, the person whose specimen is sought or his counsel may appear. The court shall be advised by the Commissioner or his designee prior to entering any testing order. If a testing order is issued, both the petitioner and the person from whom the blood specimen is sought shall receive counseling and opportunity for face-to-face disclosure of any test results by a licensed practitioner or trained counselor (from School Board Policy EBAB Adopted: May, 13, 2014, Revised August 11, 2015).

WHEN SHOULD MY CHILD STAY HOME FROM SCHOOL?

We want to support your child's school attendance. School nurses and trained personnel are available to help meet the needs of your child. For the health of your child, other students, and school staff, it is important to know when your child needs to stay home due to illness.

Please keep your child at home if you recognize any of the following:

- fever of 100 or higher in the last 24 hours: Your child may return to school once his/her temperature has been normal for 24 hours WITHOUT THE USE OF FEVER-REDUCING MEDICATIONS.
- undiagnosed rash that is accompanied by fever or itching
- bad cough or difficulty breathing
- vomiting or diarrhea within the past 24 hours
- sore throat, with fever or swollen glands in the neck
- symptoms of being sick such as being unusually tired, fussy, pale, or had difficulty waking

If your child has strep throat or another bacterial infection, please keep your child at home until the antibiotic has been given for at least 12 hours and your health care provider has given permission for your child to return to school. We encourage you to seek medical attention when your child is sick and to follow your health care provider's recommendations about returning to school and other social activities. For the current Return to School Health Plan, including COVID-19 mitigation strategies, visit www.rcps.info.

If your child is going to be absent, please call the school. We ask that you maintain communication with school personnel if the absence is for an extended period of time. Should your child be under a doctor's care, upon returning to school, please notify the school nurse prior to your child's return so the school can plan to meet your child's needs.

To help keep your child healthy and ready to learn, teach your child good cough and hand hygiene etiquette. This includes covering coughs and sneezes with tissues, coughing and sneezing into the inside of the elbow, and discarding used tissues. Hands should be washed frequently with soap and water, and hand-washing should last for at least 20 seconds. Be sure to set a good example by doing this yourself. If hands are not visibly soiled, hand sanitizers containing at least 60 percent alcohol are also effective.

HEAD LICE INFORMATION FOR PARENTS

Head lice are a common problem in school-age children. It can take up to two weeks for head lice infestation to become apparent. This information may help decrease the risk

of your child becoming infested or give you the information you need to treat head lice in your child.

What are lice?

Head lice are small, light to dark brown insects about the size of a grain of rice or smaller. The female head louse lays eggs, called nits, on the hair shaft close to the scalp. These nits, which look like tiny whitish ovals, are firmly glued to the hair shaft and usually hatch within two weeks. Nits are most often found in the hair behind the ears and at the back of the head and neck. Nits should not be confused with dandruff. Dandruff can be easily flicked off the hair, nits cannot.

FACT: All humans, regardless of race or age, can get lice. They are not a sign of being dirty and should not be considered a sign of an unclean house or neglect.

FACT: It can take up to two weeks for a head lice infestation to become apparent.

FACT: Lice have no wings and do not jump. They spread from one person to another through close contact with someone who is infested or by sharing combs, brushes, towels, headphones, hoodies, etc., with someone who has lice.

FACT: Research shows only 5% of children with lice actually get the lice at school.

FACT: Lice need human blood to survive and therefore do not live more than a couple of days away from a human.

FACT: Head lice are a nuisance but they DO NOT transmit disease.

FACT: Your school nurse and teachers are available to support you and to teach you what to do to treat your family and your home, BUT THEY CANNOT STOP THE SPREAD OF LICE IN YOUR SCHOOL. Treatment must be done effectively and completely at home to stop the spread of lice in the schools.

FACT: Students found to have head lice

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will finish the school day, then must be treated before they can return to school. Your school nurse will contact you if your child has lice and will send information to you regarding treatment and home procedures to complete. In keeping with recommendations of the American Academy of Pediatrics, the Virginia Department of Health and the Centers for Disease Control, RCPS **DOES NOT** have a "no-nit" policy. Upon completion of treatment and return to school, the school nurse should assess for appropriate treatment before being allowed to return to the classroom.

FACT: The secret to stopping the spread of lice is good HOMEWORK! Proper treatment for the live lice followed by DAILY nit removal is what it takes! Re-infestation can occur if the nits are not removed, so check for nits every day.

WHAT TO DO: Be alert for the signs and symptoms, which include intense head scratching and, of course, the presence of the live lice on the scalp or nits on the hair shaft(s). If you suspect head lice, check your child's head closely under a good light source. Head lice may be hard to locate because they move to avoid light. Nits may be easier to find. If left untreated, head lice will quickly increase in number, so you have to be sure to treat it as soon as it is detected.

If you find lice or nits in your child's hair, comb out as many of the nits as possible using a fine-tooth comb or tweezers and then use a special medicated shampoo that contains either pyrethrin or permethrin.

These products can be purchased without a prescription at any pharmacy and at most grocery stores. The medication should be used exactly as directed in the package instructions. Do not shampoo your child's hair with regular shampoo for several days after the application of the medicated shampoo. This will allow the medication to work and continue to kill the lice and nits. Use the medicated shampoo again in one week, if needed. None of the treatments are 100% effective, and it is very common for it to take a few weeks to completely resolve a head lice infestation. **DO** continue to check for and remove nits from the hair daily.

Remember to check all family members and treat those with any signs of head lice. Contact your health care provider for persistent cases that do not respond to 2 or 3 consecutive weekly treatments of the over-the-counter shampoo.

At home, the best thing to do is to check your entire family for lice and nits regularly, especially after sleepovers. It is also important to wash bedding, towels, clothes and coats in hot, soapy water. Drying these items in a hot dryer is recommended. Items which cannot be washed can be sealed in a plastic bag for two weeks. Carpets, upholstery and car seats should be vacuumed. Head lice do not live off of their hosts for more than a day or two, so excessive cleaning is not needed.

Please know that we share your concern about head lice. If you detect head lice in your child, please let the school nurse know. Your Carilion school nurse and your principal will alert parents and guardians when there is any unusual clustering of head lice cases, while still seeking to protect the privacy of individual students. Together, we can successfully eliminate head lice. Please feel free to contact your school nurse if you have any questions.

RESOURCES FOR MORE INFORMATION:

Virginia School Health Guidelines Head Lice Fact Sheet Head Lice Treatment CDC Lice Information

DRUG ABUSE AWARENESS INTERVENTIONS

A comprehensive K-12 Prevention and Intervention Program exists in Roanoke City Public Schools. The program is a cooperative effort of Roanoke City Public Schools, the Roanoke City Police Department, and many other community agencies in the Roanoke Valley. The prevention program helps students develop the skills and knowledge to resist negative pressures to use alcohol or other drugs.

PROHIBITION OF TOBACCO/NICOTINE PRODUCTS ON SCHOOL PROPERTY

Due to the health dangers of tobacco and

nicotine vapor products, no persons – staff, students, visitors, or contractors – are permitted to use or distribute any tobacco product or nicotine vapor product on a school bus, on school property, or at an on-site or off-site school sponsored activity at any time.

No student is permitted to possess a tobacco or nicotine product under the circumstances described above.

In addition, the use or distribution of any tobacco product or nicotine vapor product on a school bus, on school property, or at an on-site or off-site school sponsored activity is prohibited at all times.

Educational information on the health dangers of tobacco and nicotine vapor products are available on the RCPS website by visiting the Annual Required Notices or by visiting rcps.info/annualnotices.

SCHOOL COUNSELING PROGRAMS

The mission of the Department of School Counseling is to recognize the uniqueness and personal worth of each child and to assist each student in acquiring the academic, career and person/social competencies necessary to develop skills, knowledge, and attitudes needed to become successful lifelong learners, responsible citizens, and productive workers.

The Roanoke City Public Schools' counseling program emphasizes academic success for every student, pre-kindergarten through grade 12. School counselors work with students, parents, school staff, and members of the community as an integral part of the educational process.

REVIEW OF MATERIALS

Materials used in the school counseling program are available for parent review in each school. Interested parents should schedule an appointment with the school counselor for this purpose.

OPT-OUT

It shall be the policy of the Roanoke City School Board, with respect to academic, career, and personal/social counseling, that parents will notify the school division in writing if the student is not to participate in any part of the counseling program. The Roanoke City School Board affirms parents are the student's first teachers and public schools should serve to strengthen family and parental support. No student will be required to participate in any counseling program to which the student's parents object.

COUNSELING LIMITATIONS

Counseling techniques, which are beyond the scope of the professional certification or training of professional school counselors, including hypnosis or other psychotherapeutic techniques, are prohibited.

SEX OFFENDER REGISTRY

Roanoke City Public Schools recognizes the danger sex offenders pose to student safety; therefore, to protect students while they travel to and from school, attend school, or attend school-related activities, each school principal in the school division receives electronic notification of the registration or re-registration of any sex offenders in the same or contiguous zip codes as the school. For additional information, refer to School Board policies KN and KNA (VA Code 22.1-79.3.C).

The Sex Offender and Crimes Against Minors Registry may be accessed at www.sex-offender.vsp.virginia.gov/sor.

MANDATORY REPORTING OF CHILD ABUSE OR NEGLECT

All school personnel are mandatory reporters of suspected child abuse and/or neglect. School personnel are required by the commonwealth of Virginia to report any such suspicion within 24 hours.

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