



SELA

The International Private School

**Health Policy Highlights
for SELA Summer Families**

Summer 2024

Dear SELA Families,

Our “Health Policy Highlights for SELA Early Global Families” has been created to help our families become acquainted with what we believe to be our topmost common and important health related policies for our families to understand and follow. We hope that this handbook will give our families a better understanding of what we are doing to maintain a healthy and safe learning environment for your children.

Please know that all SELA’s Health Policies and Procedures, strictly and consistently adhere to laws, mandates, regulations, standards, resolutions, and guidelines set forth by the Massachusetts Department of Public Health (MDPH) and our governing body the Massachusetts Department of Early Education and Care (EEC). These departments serve as the foundation for all our school’s policies, practices, and procedures. **SELA reserves the right to revise these policies as needed for the overall health and safety of our SELA community.**

Please feel free to contact us with any questions or concerns that you may have. We look forward to getting to know you and your child this summer.

Sincerely,

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1. Student Health Records

Mandatory student health records must be submitted prior to a student's first day of school or camp and are required to be updated annually.

- **Student Physical Exam:** Dated within a year's time of the present date. Must include a doctor's signature. Electronic signature is acceptable.
- **Student Immunization Records:** Current and up to date immunizations, including a lead screening for children aged 2 and over, must be listed.
 - For a religious exemption to immunizations, a signed statement dated within one year must be on file.
 - For a medical exemption to immunizations, a signed doctor's exemption must be on file.
 - In the event of a vaccine preventable communicable disease being introduced within the program, those student(s) who are unvaccinated and/or under vaccinated may be prohibited from attending school per information and guidance received by the local Board of Health.
- **Student Asthma/Allergy Action Plan (if needed):** Any student who is identified as having a life-threatening medical condition that requires them to have emergency medications at the school are required to have an action plan and medication consent form to be on file. **See action plans for more details.*
- **Individual Health Care Plan** – any student with a medical condition which may require extra care, knowledge, training, or support for the child while at the program must have an Individual Health Care Plan form on file. This form is completed by the parent, director, and physician.

2. Student Handwashing

Teachers will teach and assist children by washing their hands with soap and water many times throughout the day. At a minimum, children will wash their hands:

- Upon arrival and before going home.
- Before and after eating.
- After using the bathroom and/or having diaper changed.
- After returning from the park or gym.
- After any water play activities.
- After any contact with bodily fluids.
- Whenever visibly soiled.

Hand Sanitizer Use

- Hand Sanitizer with at least 60% alcohol will be provided by SELA when hand washing is not feasible. **Sanitizers from home are not permitted.*
- Teachers may offer hand sanitizer to students aged 2 and up with parental consent only. **consent is obtained during enrollment*
- Teachers will assist students with hand sanitizer and will keep it out of the reach of children.

3. Sunscreen Policy

Communal Sunscreen

Once again SELA will be providing a communal sunscreen for our students aged 6 months and older. This sunscreen is **Kids Rocky Mountain SPF 50** and is used in many childcare settings. For SELA to provide this sunscreen to your child, we must have parental consent on file. Consent is obtained during the enrollment process.

Opting out of Communal Sunscreen

- Parents may opt-out of the communal sunscreen during enrollment and at any time by informing your child's teacher on Brightwheel.
- Parents who opt-out are asked to send in their own bottle of sunscreen for their child, labeled with their child's name in a Ziploc bag to be kept at school.
- If a child does not have permission for communal sunscreen and does not have sunscreen at the school, the parent will be called and asked to bring sunscreen to the school that day in order for the child to go outside.

Additionally:

- Classroom teacher will apply sunscreen prior to going outside.
- Classroom teacher will wear gloves while applying sunscreen to a child.
- Parents and Guardians are asked to send in a hat for their child for additional sun protection.
- Parents and Guardians who **do not want sunscreen applied** to their child must send in a hat and long sleeve shirt to aid in sun protection. The student will be kept out of the direct sunlight as much as possible.

Infants under 6 months:

- SELA is not permitted to apply sunscreen to any infant under 6 months old, regardless of parental consent.
- Infants under 6 months will be kept in shaded areas at all times when outside. Parents and Guardians are asked to send in a hat for their child for additional sun protection.

4. Medication Policy

Per EEC regulations, SELA staff are unable to administer any medication to a child, including all over the counter oral, ophthalmic, and topical medications without a signed medication consent form or doctors order form. The medication consent form or doctors order form must be signed by the doctor and the parent to be valid. The medication consent form or doctors order form must contain the following information:

- Child's full name
- Name of Medication
- Dose of Medication
- Directions for Administration of Medication
- Any Side Effects
- Reason for Medication
- Duration of Medication

Only the school nurse and/or designated staff members who have completed the 5 rights of medication administration course and who currently possess a current CPR certificate may administer medications to a student. Universal precautions will always be upheld. Whenever possible, only the school nurse will administer medications. Only the school nurse can administer a first dose of any medication to a child, and only under extenuating circumstances.

Delivering Medication to SELA

Never place medication in your child's backpack and/or lunch box. Medication should be placed in a clear Ziploc bag, labeled with the child's name, and handed directly to a staff member when dropping off your child.

Disposing of Medication

SELA will notify the child's parent/guardian of left-over medication and asked to retrieve the medication within 14 days from the last day of school. Unused medication not retrieved within 14 days will be discarded.

5. Allergy and Asthma

An Allergy and/or Asthma action plan packet will be provided during the enrollment process if you note that your child has a life-threatening allergy, asthma or other medical condition that requires medication to be kept at the school for the child. This packet provides detailed information on the required forms as well as information on how to deliver your child's medication to the school.

- Allergy/Asthma action plans dictate what medications a student will need in the event of a medical emergency. The indications for, signs and symptoms for along with physician and parental consent are obtained through this form.
- Physician may use their own allergy/asthma action plan.
- Each medication prescribed must have an individual signed medication consent form (signed by both the physician and the child's parent/guardian).
- All required documentation must be received prior to the child's first day of school/camp.
- Any discrepancies and/or missing documentation must be corrected and/or received prior to the students' first day of school/camp.
- Emergency medication must be hand-delivered to the school and must be in the original prescription box with the prescription label clear.
- Epi-Pens and similar epinephrine auto injectors must be kept and received in the two packs they came in.
- Over the counter medications, such as Benadryl, must be labeled with the child's name.
- Medication must not be expired.
- Any student arriving to school without the proper documentation on file, with expired medication, with medication that is not in the original prescription box or with an Epi-Pen box that only contains one auto-injector will not be allowed to attend school until the above issues are corrected.

6. Peanut and Tree Nut Free School Policy and Food Allergies

Due to severe allergies within the school, SELA maintains a strict NO peanut and tree nut school policy. Items containing peanuts and/or tree nuts are not permitted inside the building for any reason. This includes food/drink labels that read:

- Contains peanuts and/or tree nuts
- Made or manufactured in a facility that processes peanuts and/or tree nuts

- May contain traces of peanuts and/or tree nuts

If a student is found or suspected to have a food item that contains peanuts and/or tree nuts or made in a facility that processes peanut and tree nut products it will be immediately removed from the classroom. Parent or guardian will be notified via email and if needed, an alternative age-appropriate snack will be offered with parental consent (obtained during the enrollment process).

A Note on other non-nut food allergens (eggs, dairy, fish, etc.)

While the school maintains a strict peanut and tree nut free school policy, we do allow other foods that young children may be allergic to such as eggs, fish, dairy. If there is a student in your child's class with an allergy to one of these allowed foods, we will notify you and request that you inform the classroom teacher on Brightwheel if you are sending your child to school with one of these foods. This is to ensure the appropriate precautions are taken ahead of lunch/snack to ensure there is no accidental exposure including making sure the student with the allergy is seated at a separate table than the student with the food item.

7. Injuries While at School

SELA staff are all trained and certified in CPR and First-Aid. Only those staff members certified in First Aid will administer first-aid to a child. Each classroom teacher keeps a first aid kit with her at all times.

Minor Injuries and Incident Reports on Brightwheel

1. Classroom teacher will provide basic first aid.
2. Parent and/or Guardian will be notified of the injury through Brightwheel. This notification, known as an incident report on Brightwheel, has replaced the paper injury report forms previously sent home for all minor injuries.
3. For any injuries to the head or face that cause swelling, bleeding or a laceration, the nurse or director will assess the child and update the parent by phone.

Injury Reports

An injury report will be completed for any injury requiring outside medical treatment and/or injuries to the head that cause swelling. This includes any injuries in which the child is sent to the doctor, urgent care, or emergency room for evaluation. Injury report will be completed and sent home within 24-hours. Parents are asked to read, sign, and return the injury report.

If your child sustains in injury while at home, please message your child's teacher through Brightwheel to inform them of the injury.

9. Student Illness and Communicable Disease Policy (exclusion from school)

NEW: Student Health Checks on Brightwheel

In the event your student is seen or evaluated by the nurse during the school day the nurse will complete a student health check on Brightwheel. You will see this report in your child's daily feed on Brightwheel. Depending upon the nature of the illness or injury, the nurse may call home as well and/or ask for your child to be picked up.

Listed below are some common childhood illnesses and SELA policy for exclusion and return to school. For questions regarding an illness that is not listed below, please contact the school nurse or director for further guidance.

Upper Respiratory Illness (cold, croup, COVID-19, RSV, Flu)

Student must remain at home until symptoms have improved, the child has been fever-free for 24-hours without the use of fever reducing medication, the child is eating, drinking, sleeping and able to participate in the school day activities.

Any student presenting with upper respiratory symptoms while at school along with other signs of illness while at the program will have parent/guardian contacted and the child will be sent home.

Fever (100.4 degrees F and above and/or feeling feverish or acting sick combined with lower grade fever (99-100))

Student must remain at home until they have been 24-hours fever free without the use of fever reducing medication.

Any student presenting with a fever of 100.4 degrees or higher while at the program will have parent/guardian contacted and the child will be sent home.

Vomiting

Student must remain at home until 24 hours have passed since the last vomiting episode. Student should be able to hold down food and liquids.

Any student who vomits 1 time while at the program will have parent/guardian contacted and the child will be sent home. **Please note this does not include vomiting from a known cause, such as acid reflux. Documentation must be on file with SELA to inform of underlying conditions which may predispose a child to vomiting.*

Diarrhea

Student must remain at home until 24-hours have passed since the last episode of diarrhea.

Any student who has 3 or more loose, watery stools while at the program will have parent/guardian contacted and the child will be sent home. **Does not include diarrhea caused by laxative use, antibiotic use, and dietary changes, if documented.*

Any student who has 1 or more episodes of loose, watery stool that contains blood or mucous, is accompanied by abdominal pain, fever, nausea and/or vomiting, or cannot be contained in a diaper and/or causes the child to be incontinent (regardless of cause) will have parent/guardian contacted and the child will be sent home.

Conjunctivitis (Pinkeye)

Student must remain at home until they have been on antibiotics for 24 hours.

If the child's pediatrician determines that the child does not have bacterial conjunctivitis and antibiotics are not prescribed, a doctor's note stating as such will be required for a child to return to school.

Any student who presents during the school day with symptoms of conjunctivitis such as yellow or green drainage from the eye, crusting of the eyelids, redness to the sclera (whites) of the eyes, swelling and/or pain to the eye will have parent or guardian contacted and the child will be sent home. The child will need to be seen by his or her doctor and if the doctor determines the child does not have bacterial conjunctivitis, the child may return with a physician's note. If the physician prescribes antibiotics, the child must stay home until 24-hours have passed while on the antibiotics.

Skin Infection, Staph Infection, Impetigo

Student must remain home until they have been on antibiotics for 24 hours.

Any open areas and/or lesions must be dried or scabbed over. Band aids may not be used to cover weeping and/or open lesions.

Strep-Throat

Student must remain at home until they have been on antibiotics for 24 hours.

Any student presenting at school with symptoms of strep throat will have parent/guardian contacted and the child will be sent home.

Coxsackievirus (Hand, Foot, and Mouth)

Student must remain at home until they have been fever free for 24 hours without the use of fever reducing medications. **In addition to being fever free, the child must not have any blisters or open areas on the face or hands. All areas on the face or hands must be dried up and scabbed over.** Band-aids may not be used to cover areas on the hands and face. If the child still has areas/blisters on the arms, torso, buttocks, legs, or feet the child may attend school **if** they are able to remain dressed in clothing covering the affected areas mentioned above. Please send in a change of clothes with your child to ensure we are able to keep the areas covered in the event the child needs to change his/her clothing. Infants and young toddlers experiencing excessive drooling that have lesions in the mouth or throat should remain at home until the areas are healed.

10. Choking Hazards and Food Safety Policy

Parents and guardians are asked to not allow their child to come to school with items that pose a potential choking hazard. This includes but is not limited to, loose buttons, coins, marbles, small bounce balls, small hair clips and barrettes on infants and toddlers, rocks, small toys, pen, and marker caps, etc.

SELA Food Safety Policy

Parents and Guardians are asked to not send high-risk choking foods to school with children under age 4 that is not properly cut and prepared. High risk choking foods include:

- Whole, uncut round foods such as grapes, large blueberries, and cherry tomatoes
- Large chunks of hard fruits and vegetables
- Large chunks of meat and/or meat on a bone
- Uncut Tubular shaped foods, such as cheese sticks, hot dogs, and baby carrots

For the safety of your child while they are here at SELA, we will not be able to serve these high-risk choking hazard foods to your child if they are sent in their lunch and are not properly prepared and cut safely. You will be notified and given the option to bring in an alternate item, or you can choose for your child to receive an alternate snack option we provide. For infants and toddlers, food should be cut into ¼ inch sized cubed pieces and/or thin ½- 1-inch strips, for preschool aged children food should be cut in ½ inch size cubed pieces and/or thin 1-1 ½ inch strips. Tubular shaped foods (example cheese sticks) should **not** be cut into round pieces but instead into short thin strips.

11. Illness Prevention and Notifying Parents

SELA has been working hard since our return to in-person learning in the summer of 2020 to limit the spread of illnesses within the school. Listed below are the ways SELA is working to maintain a healthy school environment and limit the spread of illness within the school.

- Mandatory COVID vaccination for all SELA employees. Our staff here at SELA is 100% vaccinated.
- Increased cleaning practices using safe yet highly effective cleaning agents.
- Full time housekeeping staff who are constantly cleaning classrooms, playgrounds, indoor play spaces, toys, and bedding.
- Use of Eva-Clean sprayer for playground equipment, gym equipment and classroom surfaces. **Not in use in the presence of children*
- Classroom toys are rotated out several times per day and after each use by a child to be cleaned and disinfected.
- Private sleeping cot, crib or mat for each child which are thoroughly cleaned and disinfected prior to use by another child.
- Increased ventilation and use of an air purifier in each classroom.
- Whenever possible students will eat and spend time outside.
- Frequent handwashing with soap and water
- Health Department is committed to staying up to date on all the latest COVID-19 trends, updates to CDC guidance, MDPH guidance and EEC guidance.

Parental Notification of Illness

In the event SELA is made aware of a communicable illness inside your child's classroom by evidence of two or more cases within a short time frame, an email will be sent to parents of the affected classroom notifying families of the illness. The email will contain information regarding the type of illness, signs, and symptoms, and return to school criteria if your child is diagnosed with this illness.

In the event of a reportable disease introduced into the program, SELA will work closely with the local Board of Health to ensure prompt and accurate information is delivered to families.

12. Emergency Procedures

SELA teachers are all trained in responding to any emergency situation that arises within the school. Emergency drills are practiced monthly at SELA. In an emergency evacuation teacher will get the first aid bag, attendance and walkie talkie and will:

1. Line up students
 - a. *Walking ropes and/or evacuation crib/stroller will be used for infants and toddlers.*
2. Take attendance (name-to-face)

3. Evacuate as quickly and safely as possible via the nearest emergency exit and proceed to the meeting location.
4. Take attendance once outside (name-to-face).
5. Supervise children and provide comfort while awaiting further instructions.

Alternate Shelter

In the event SELA needs to be evacuated to an alternate shelter, parents will be contacted and given the location of the shelter to pick up their child.

Medical Emergency

In the event of a medical emergency occurring onsite, the child will be transported to the nearest medical facility via ambulance. Parents will be contacted by the director or another supervising administrator. The child will be accompanied in the ambulance to the hospital by the director, nurse, or teacher familiar with the child and will remain with the child until the parent or guardian arrives. There is a nurse or administrator on site at all times when the program is in session that is certified in Infant and Child First Aid and CPR.