**ANNUAL SCHOOL HEALTH REPORT 2022-2023**

**NOTICE: To ensure compliance with school health and safety statutes and regulations and to align with the beginning of academic school years, this Annual School Health Report will apply to academic year 2022-2023.**

**Please complete this form via eRIDE by June 30, 2022**
ALL elements of this report are mandated by statute or regulation or are accepted best practices.

**DISTRICT/SCHOOL INFORMATION**

**District/School Name:**

**Public District** **[ ]  Charter** **[ ]  State Operated** **[ ]  Non public** **[ ]**

**Superintendent/School Authority:**

**Email: Telephone:**

1. **School Health Personnel:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Title/Responsibility** | **Name** | **Phone** | **E-mail** |
| School Physician  |  |  |  |
| School Dentist  |  |  |  |
| Administrator of the School Health Education Program  |  |  |  |
| District Health and Wellness Subcommittee Chair [ ]  **N/A for non-publics**  |  |  |  |
| Facilities Manager/ Maintenance Director |  |  |  |
| Chemical Hygiene Officer |  |  |  |
| Asbestos Coordinator [ ]  **N/A if all school buildings were built after 1980** |  |  |  |

1. **Does your district’s school committee have a Health and Wellness subcommittee, as required by** [**RIGL §16-21-28**](http://webserver.rilin.state.ri.us/Statutes/title16/16-21/16-21-28.HTM)**?**

Yes [ ]  No [ ] N/A for non-publics[ ]

**3. Is there a School Health Manual (including all health and safety policies, procedures, plans**

 **etc.) at the central office of your district/school?**

Yes [ ]  No [ ]

1. **Is there a School Health Manual at each school building?**

Yes [ ]  No [ ]  N/A[ ]  (if only one school building)

**5. When was your health education curriculum reviewed and/or revised?** Year­­­­­­­­­**\_\_\_\_\_\_\_\_**

**6. Is your health education curriculum aligned with *the*** [***RI Health Education Framework***](http://www.thriveri.org/documents/RI_HE_Framework.pdf) ***and***

 **mandated**[***Comprehensive Health Instructional Outcomes***](http://thriveri.org/documents/RI_CHI_Outcomes.pdf)**?**

Yes [ ]  No [ ]

**6 a**. **Have all** **students in 6th through 12th grade received annual suicide prevention training from the** [**approved training list**](https://www.ride.ri.gov/Portals/0/Uploads/Documents/Students-and-Families-Great-Schools/Health-Safety/Mental-Wellness/Resource-List.pdf?ver=2022-03-29-105910-987) **provided by RIDE in alignment with the mental health and suicide prevention instructional outcomes listed in the** [***Comprehensive Health Instructional Outcomes***](http://thriveri.org/documents/RI_CHI_Outcomes.pdf) **and the RI Health Education Framework in accordance with [RIGL 16-21-7.](http://webserver.rilegislature.gov/Statutes/TITLE16/16-21.7/INDEX.htm)**

Yes [ ]  No [ ]  N/A [ ]  (Do not have grades 6 through 12 at the schoolnonpublics)

**7. When was your physical education curriculum review and/or revised?** Year\_\_\_\_\_\_\_\_\_

**8. Is your physical education curriculum aligned withthe** [***RI Physical Education Framework***](http://www.thriveri.org/documents/RI_PE_Framework.pdf)***?***

(Per RIGL §16-22-4]

Yes [ ]  No [ ]

1. **Do all students in grades K-12 receive an average of 100 minutes of health and physical education per week, not including recess or before-or after-school activities, *OR* substantially equivalent program for**

**non-public schools, as required per** [**RIGL§16-22-4**](http://webserver.rilin.state.ri.us/Statutes/TITLE16/16-22/16-22-4.HTM)**?**

Yes [ ]  No [ ]

1. **Does your district provide daily, at least 20 consecutive minutes of unstructured free-play recess for students in elementary grades Kindergarten through six (6) in accordance with** [**RIGL§ 16-22-4.2**](http://webserver.rilin.state.ri.us/Statutes/TITLE16/16-22/16-22-4.2.HTM)**?**

Yes [ ]  No [ ]  N/A [ ]  (Do not have grades kindergarten through six at the school)

1. **Do all elementary, middle, and high schools that sell or distribute competitive foods and beverages on the school campus during the school day offer only healthy foods and beverages, as set forth by the USDA and as required per** [**RIGL §16-21-7**](http://webserver.rilin.state.ri.us/Statutes/TITLE16/16-21/16-21-7.HTM)**?**

Yes [ ]  No [ ]  N/A [ ]  (Do not sell or distribute competitive foods and beverages on school campus during the school day)

1. **Does your district/school have a protocol to review student immunization records annually for ALL students**

**and for NEW students entering your district/school to ensure compliance with immunization regulations**

**(**[***RI Rules and Regulations Pertaining to Immunization and Communicable Disease Testing in Preschool, School, Colleges or Universities***](https://rules.sos.ri.gov/regulations/part/216-30-05-3)**)?**

Yes [ ]  No [ ]

1. **Does your district/school have a protocol to provide or ensure the required screenings listed**

 **below as scheduled according to the** [***RI Rules and Regulations for School Health Programs***](https://rules.sos.ri.gov/regulations/part/216-20-10-4)**?**

 ***NOTE for Non-Public Schools:*** *You need to ensure that screenings take place – you do not have to provide*

 *screenings. Evidence that screenings were done by a student’s family health and dental provider is acceptable.*

|  |  |
| --- | --- |
| **Health examinations**  | Yes [ ]  No [ ]  |
| **Vision**  | Yes [ ]  No [ ]  |
| **Hearing** | Yes [ ]  No [ ]  |
| **Speech/language** | Yes [ ]  No [ ]  |
| **Scoliosis** **(grades 6-8 only)** | Yes [ ]  No [ ]  NA [ ]  No grades 6-8 |
| **Dental** | Yes [ ]  No [ ]  |
| **Lead Screening**  | Yes [ ]  No [ ]  NA [ ]  No students under 6 years old.  |

1. **How many non-public schools receive health services from your school health personnel? #\_\_\_\_\_\_\_\_\_\_\_\_** [ ]  N/Afor non-publics
2. **Have you provided the required Teen Dating Violence training for designated school personnel, as required by** [**RIGL§16-21-30**](http://webserver.rilin.state.ri.us/Statutes/TITLE16/16-21/16-21-30.HTM)**?**

Yes [ ]  No [ ]  NA [ ]  (No grades 7-12)

1. **Have all coaches, trainers, school nurses, and volunteers involved in youth organized recreational and/or athletic competition completed the annual training course in concussions and traumatic brain injuries, as required by** [**RIGL§16-91-3**](http://webserver.rilin.state.ri.us/Statutes/TITLE16/16-91/16-91-3.HTM)**?**

Yes [ ]  No [ ]  NA [ ]  (No organized recreational and/or competitive sports)

1. **Have all coaches and school volunteers, involved in a youth sport program, including school based teams or teams organized through the RIIL, or activity, completed a training course about the nature and warning signs of sudden cardiac arrest, including the risks associated with continuing to play or practice after experiencing symptoms as required by** [**RIGL§16-91-1**](http://webserver.rilin.state.ri.us/Statutes/TITLE16/16-91.1/INDEX.HTM)**?**

Yes [ ]  No [ ]  NA [ ]  (No organized recreational and/or competitive sports)

1. **Have all school employees (including teachers, administrators, custodians, lunch personnel, substitutes, nurses, coaches/coaching staff, volunteers) completed a suicide prevention training course this academic year from the** [**approved list of training materials**](https://www.ride.ri.gov/Portals/0/Uploads/Documents/Students-and-Families-Great-Schools/Health-Safety/Mental-Wellness/Resource-List.pdf?ver=2022-03-29-105910-987) **provided by RIDE, given by a qualified suicide prevention instructor, which included appropriate mental health services within school and community and when and how to refer youth and family to these services as required by** [**RIGL 16-21-7.**](http://webserver.rilegislature.gov/Statutes/TITLE16/16-21.7/INDEX.htm)

Yes [ ]  No [ ]  NA [ ]  (for nonpublics)

1. **Is there at least one person other than the school nurse who is trained, competent and responsible for the administration of first aid, CPR, and other emergency procedures at the school(s) at all times during school hours and at on-site school sponsored activities?**

Yes [ ]  No [ ]

1. **Do all high school students (grades 9-12) receive psychomotor skill-based cardiopulmonary resuscitation (CPR) training to support cognitive learning and an overview of automated external defibrillator (AED) use prior to graduation, as required by** [**RIGL§16-22-15**](http://webserver.rilin.state.ri.us/Statutes/TITLE16/16-22/16-22-15.HTM)**?**

Yes [ ]  No [ ]  NA [ ]  (NA for non-publics or for schools with no grades 9-12)

1. **Do all high and middle schools have automated external defibrillators (AEDs) on site for daily use, for school sponsored activities, and athletic events for use in emergencies and with someone trained in the use of the AED present at each event, as required by** [**RIGL §16-21-33.**1](http://webserver.rilin.state.ri.us/Statutes/TITLE16/16-21/16-21-33.1.HTM)**?**

Yes [ ]  No [ ]  NA [ ]  (No middle or high schools)

1. **Do all of your schools post the RI DCYF child abuse hotline reporting sign required by** [**RIGL16-21-36**](http://webserver.rilin.state.ri.us/Statutes/TITLE16/16-21/16-21-36.HTM)**?**

**Yes [ ]  No [ ]**

1. **Are feminine hygiene products available, free of charge, in all gender neutral bathrooms and any bathroom designated for females in public schools serving grades 6-12 per** **[RIGL 16-21-38](http://webserver.rilegislature.gov/Statutes/TITLE16/16-21/16-21-38.htm)**

Yes [ ]  No [ ]  NA [ ]  (for nonpublics)

1. **Complete the following regarding your district/school protocols, procedures, policies, plans and/or standing orders, as required per the** ***[RI Rules and Regulations for School Health Programs](https://rules.sos.ri.gov/regulations/part/216-20-10-4)*:**

|  |  |  |
| --- | --- | --- |
| PROCEDURES/PROTOCOL/STANDING ORDERS | Year Reviewed and/or Updated | Comments |
|  |  |  |
| First aid and emergencies, including anaphylaxis  |  |  |
| Epi-Pens for Medically identified students |  |  |
| Sports related concussion protocol  |  |  |
| Diabetes Self-Management |  |  |
| Glucagon Administration  |  |  |
| Administration of Prescription medications  |  |  |
| Administration of Non-prescription medications |  |  |
| Administration of medications at off-site school sponsored activities  |  |  |
| Self-carry of inhalers  |  |  |
| On-site vehicular and pedestrian traffic  |  |  |
| Latex Sensitivity/Allergy  |  |  |
| Integrated Pest Management Procedures  |  |  |
| Use of Universal Precautions  |  |  |
| Peanut/tree nut allergy protocol  |  |  |
| Opioid antagonists (Naloxone) maintained on-site in each school facility to treat opioid overdose [RIGL §16-21-35](http://webserver.rilin.state.ri.us/Statutes/TITLE16/16-21/16-21-35.HTM) |  |  |
| Possession and use of topical sunscreen product by students, parents and school personnel without a physician’s note or prescription, with parent note in students in grades K-5 [RIGL 16-21-39](http://webserver.rilegislature.gov/Statutes/TITLE16/16-21/16-21-39.htm) |  |  |
| Protocol for reporting child abuse, neglect and sexual abuse specifying responsibilities of all school personnel per [RIGL 40-11-3](http://webserver.rilin.state.ri.us/Statutes/TITLE40/40-11/40-11-3.HTM) [RIGL 40-11-2](http://webserver.rilin.state.ri.us/Statutes/TITLE40/40-11/40-11-2.HTM), and [RIGL 40-11-3.3](http://webserver.rilin.state.ri.us/Statutes/TITLE40/40-11/40-11-3.3.HTM) |  |  |
| PLANS/ASSESSMENTS |  |  |
| Chemical Hygiene Plan  |  |  |
| School Safety Plans  **–** reviewed annually by the school committee, updated annually, and completed by November 1 of each year as required by [RIGL §16.21.25](http://webserver.rilin.state.ri.us/Statutes/TITLE16/16-21/16-21-25.HTM). |  |  |
| School Safety Assessment - conducted in conjunction with local police, fire, and school safety team to examine the current status of each building’s safety as required by [RIGL §16-21-23](http://webserver.rilin.state.ri.us/Statutes/TITLE16/16-21/16-21-23.HTM). Reviewed annually and updated every three years. |  |  |
| Threat Assessment Teams - Each local school board or committee shall adopt written policies for the establishment of threat assessment teams, including the assessment of and intervention with individuals whose behavior may pose a threat to the safety of school staff or students consistent with the model policies developed by the school safety committee. The policies shall include procedures for referrals to community services or healthcare providers for evaluation or treatment when appropriate as required by [RIGL 16-21-23.2](http://webserver.rilin.state.ri.us/Statutes/TITLE16/16-21/16-21-23.2.HTM). |  |  |
| Asset Protection Plan [ ]  **N/A for non-publics**  |  |  |
| POLICIES |  |  |
| Weapons & firearms |  |  |
| Tobacco, alcohol, & other drugs  |  |  |
| Treatment of students and staff with HIV  |  |  |
| Non-discrimination Policy based on Sexual Orientation([Board of Regents Regulations](http://www.thriveri.org/documents/RIDE%20Policy%20Statement%20on%20Discrimination%20Sexual%20Orientation.pdf)) |  |  |
| Statewide Bullying Policy [RIGL §16.21.34](http://webserver.rilin.state.ri.us/Statutes/TITLE16/16-21/16-21-34.HTM) |  |  |
| Teen Dating Violence Policy [RIGL §16.21.30](http://webserver.rilin.state.ri.us/Statutes/TITLE16/16-21/16-21-30.HTM)[ ]  **N/A (No grades 7-12)** |  |  |
| Peanut/Tree Nut Allergy Policy [RIGL §16-21-32](http://webserver.rilin.state.ri.us/Statutes/TITLE16/16-21/16-21-32.HTM) |  |  |
| Protections for Transgender and Gender Nonconforming Students [200-RICR-30-10-1](http://www.ride.ri.gov/LinkClick.aspx?fileticket=htpel7McieQ%3D&portalid=0) [ ]  **N/A for non-publics**  |  |  |
| Suicide Prevention Policy addressing procedures relating to suicide prevention, intervention, and postvention in accordance with [RIGL 16-21-7](http://webserver.rilegislature.gov/Statutes/TITLE16/16-21.7/INDEX.htm) and aligned with model policy developed by RIDE. [ ]  **N/A for non-publics**  |  |  |

1. **Have your schools disposed of all the prohibited chemicals referenced in the** [***RI Rules and Regulations for School Health Programs***](https://rules.sos.ri.gov/regulations/part/216-20-10-4)**?**

Yes [ ]  No [ ]

1. **Environmental tests and/or inspections:**

|  |  |
| --- | --- |
| Lead | Are all water fountains in your schools lead free? Yes [ ]  No [ ]  |
| Asbestos | Have all buildings in the school system received both initial and current 3-year re-inspections by a certified Asbestos Consultant as required by the Federal Asbestos Hazard Emergency Response Act?  Yes [ ]  No [ ]  N/A [ ]  (Buildings built after 1980)Have all schools completed 6 month surveillance reports? Yes [ ]  No [ ]  N/A [ ]  (Buildings built after 1980) |
| Radon | Have all occupied buildings in the school system received initial and 3-year retesting for radon gas levels by a certified radon measurement consultant as required by the RI Rules and Regulations for Radon Control? Yes [ ]  No [ ]  Have all levels above 4 pCi/L been either remediated or put on long-term testing?  Yes [ ]  No [ ]  |
| Food Services | Food Service Program will be inspected twice this year? Yes [ ]  No [ ]  N/A [ ]  (for schools not participating in National School Lunch Program or School Breakfast Program) |
| Building Inspection | All school buildings **have received or have scheduled** the following required inspections **before**the opening of the school year:**Building inspection** - Yes [ ]  No [ ]  (*Detailed explanation is required for “No”* *response)***Fire** **inspection** - Yes [ ]  No [ ]  (*Detailed explanation is required for “No”* *response)* | **If No, provide detailed explanation:** |

1. **Do all playgrounds on school property meet the** [**Consumer Product Safety Commission (CPSC) Guidelines**](https://www.cpsc.gov/s3fs-public/325.pdf) **referenced in the *RI Rules and Regulations for School Health Programs*?**

Yes [ ]  No [ ]  N/A [ ]  (No playgrounds on school property)

1. **Do all school health rooms meet the regulatory standard?**

Yes [ ]  No [ ]

1. **Does your district/school maintain a log of work-related injuries/illnesses (**[**Code of Federal Regulations, Title XXIX, OSHA Standard 300**](http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_id=11301&p_table=STANDARDS)***)*?**

Yes [ ]  No [ ]

1. Does each school maintain a record of Safety Data Sheets (SDS) that is updated regularly and is

available to staff, students, parents and others in the community?

 Yes [ ]  No [ ]

[ ]  **As the superintendent or non public school authority, I hereby certify that to the best of my**

 **knowledge, the information contained in this Annual School Health Report is correct and in**

 **compliance with RI General Laws relating to school safety and health and federal regulations**

 **for purposes of ensuring the health and safety of students, staff, and others in the community.**