



Strong minds. Strong bodies. Strong schools.

A partnership of the RI Departments of Education and Health
with funding from the Centers for Disease Control and Prevention

thrive report

Vol 4, Number 1, September 2010

September 2010 Issue: Back to School

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thrive by the numbers

News You Can Use

236 Reported number of confirmed cases of lyme disease in 2007 in Rhode Island.

995 Number of suspected cases of lyme disease in 2007 in Rhode Island.

200 Percent increase, from 1997-2007 in concussions among 14-19 year olds playing organized team sports in the U.S.

16 Number of vaccine preventable diseases covered by the RI Department of Health, Vaccinate Before you Graduate

September 2010 Focus: Back to School

Welcome back to a new school year! As the new school year begins, Rhode Island's Coordinated School Health Program would like to support your efforts to address new health-related laws, regulations, or programs and/or provide guidance regarding annual health-related tasks that accompany the start of every school year. See *The Core Issue, below*, for details on back to school news you can use.

As the year progresses, please continue to check the RIDE Coordinated School Health website, [thrive](#), for new and updated information related to school health issues.

The Core Issue: Back to School - School Health News

New Rhode Island Concussion Law - Effective July 1, 2010, all school coaches and volunteers must receive concussion training, must remove any player from a game or practice who exhibits signs or symptoms of a concussion, and that player must obtain written medical authorization before being allowed to return to play, and more. RI 2010 Public Laws [Chapters 10-022](#) & [10-021](#).

School districts and schools are required to use training materials of the U.S. Centers for Disease Control and Prevention entitled "[Heads Up: Concussion in High School Sports/Concussion in Youth Sports](#)" or materials substantially equivalent.

For a detailed summary of the RI Concussion Law For Concussions and Head Injuries in Competitive Athletics, including forms, go to the [thrive website](#) and scroll down to July 2010.

Program.

165,681 Number of RI school age children vaccinated through school-based H1N1 flu clinics in 2009-2010.

100 Percent of public and private schools that participated in H1N1 flu clinics.

300, 000

Annual incidence of sports-related concussions in the U.S.

Sources:

[Rhode Island Department of Health](#), [ImPACT](#)

RIDE School Health News You Can Use Links

[Rhode Island Department of Health](#)

[Rhode Island Interscholastic League](#)

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[Kids Health](#)

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[Centers for Disease Control](#)

Rhode Island Department of Elementary and Secondary Education

255 Westminster St. Providence, RI 02903

Lyme Disease Awareness and Prevention Program

As you know, [Lyme Disease](#) is a critical health issue in southern New England. All children should be made aware of the disease, how to avoid tick bites, and the importance of medical treatment. Please see the [new law](#), which took effect in February 2010 and states that the Department of Elementary and Secondary Education shall, in collaboration with the Department of Health make lyme disease awareness and prevention resources available for all public school students in the state. For additional details and resources go to the [thrive website](#) and scroll down to Lyme Disease.

School Based Vaccination Clinics

Based on the success of reaching students through its school-based H1N1 vaccination clinics last year, the RI Department of Health (HEALTH) is continuing to provide [school-based influenza clinics](#).

The RI Department of Health is also expanding [Vaccinate Before You Graduate](#) (VBYG) to include all students in the state from grades 9 through 12. VBYG is a free, school-based adolescent immunization program that provides Rhode Island children access to the vaccines they need before they graduate high school. VBYG allows students to receive vaccine for the following illnesses:

- Seasonal flu (this year's vaccine will also protect against H1N1 flu)
- Hepatitis A
- Polio
- Hepatitis B
- Tetanus, Diphtheria, and Pertussis (Tdap)
- Human Papillomavirus (HPV)
- Varicella (Chickenpox)
- Meningococcal Conjugate (Meningitis)
- Measles, Mumps, and Rubella (MMR)

For [detailed information](#) and clinic schedules go to the HEALTH website.

Data Collection

- During this school year, RIDE will again, be conducting the Youth Risk, Behavior Survey (YRBS) in winter/spring 2011.
- SurveyWorks! (previous SALT survey) was distributed to students in the spring of 2010. Students, parents and teachers will be surveyed this coming school year.

Annual Guidance:

- [Policy Statement Prohibiting Discrimination Based on Sexual Orientation](#)
- [The red book: Exposure to Blood on the Job: What School Employees](#)

Donald L. Carcieri Governor

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© thrive report
Annie Marie Silvia, Editor

The *thrive report* can be found at
www.thriveri.org/report.html

[Join Our Mailing List!](#)

[Need to Know](#)

- [Policy Guidelines Relating to HIV/Hepatitis](#)
- [Universal Precautions Presentation](#) (PowerPoint)

Regulations:

- *The RI Rules and Regulations For School Health Programs* is currently being revised to reflect new laws and/or clarify language.
- New Basic Education Plan (BEP) - see below, for details on Chapter 14 - Safe, Healthy, and Supportive Learning Environment.

REMINDER - Attendance Reporting

All schools are required to submit daily attendance via [eRIDE](#) throughout the school year. The eRIDE system sends automated responses to superintendents and data managers informing them of what schools in their districts have not submitted daily attendance data. Additionally, as indicated in the automated response, all schools must continuously report daily absenteeism in real-time on a daily basis throughout the school year. Absentee rates in schools are often the first indication that an outbreak could be occurring. The RI Department of Health continues to use school daily absenteeism data for the epidemiologic surveillance of illness in schools. For additional questions, etc. please contact the RIDE Helpdesk at 401-222-8400.

Fresh from the Field: RI New Basic Education Plan - School Health Issues

[The Basic Education Program](#) (BEP) is a set of regulations promulgated by the Board of Regents to establish minimum standards for the RI public education system. The BEP is regulatory in nature and, as such, has full force of law. The BEP includes chapters on its purpose and framework and on management and oversight. The updated BEP went into effect July 1, 2010.

Central to equal educational opportunity is the presence of a basic level of academic and support programs that demonstrate substantial compliance with established qualitative standards, coupled with a demonstrated commitment to continuous improvement. Each student must be provided equal access to at least the services that are described in the BEP. Although not required that every school offer every service in the BEP, it is required that LEAs ensure equal access to mandated services for each and every student.

School health issues are included in Chapter 14 of the BEP, "Safe, Healthy, and Supportive Learning Environment". Sections in this chapter include:

- Academic Supports and Interventions for All Students
- Supportive and Nurturing School Community
- Health and Social Service Supports and

- Safe and Healthy Physical Environment

Health education and physical education are in the curriculum Chapter 13, sections G-13-1.3.9 and G-13-1.3.10.

Each section provides details of the framework as well as the standards for that section.

Information gathered as a result of measuring LEA compliance with the BEP will allow different constituencies to bring an informed perspective to the ongoing process of improving the Rhode Island public education system.

As always, we welcome and encourage your feedback about **thrive**, Rhode Island's Coordinated School Health model. Please email us at midge.sabatini@ride.ri.gov or rosemary.reilly-chammat@health.ri.gov.

Sincerely,

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