

**Policy 2423: Health Promotion and Disease Prevention
 Comment Log
 Beginning March 13, 2014 & Ending April 14, 2014 @ 4:00PM**

Action		Type	
N	No Response	-	Negative
NA	Not Accepted	+	Positive
A	Accepted	o	Neutral

DATE	INDIVIDUAL ORGANIZATION	COMMENTS	ACTION/TYPE	RATIONALE
03-23	Kim Tieman Program Officer Benedum Foundation Charleston WV	<p>The Benedum Foundation is pleased to promote health screening for children to insure school entry and success. This policy change would be the single greatest achievement in addressing access to care for children's oral health and we are proud to be a partner in this effort.</p> <p>This policy has the potential to make a great impact in utilization of dental benefits and to connect medical and dental homes. This policy provides a failsafe for those few children without dental coverage.</p> <p>There are no punitive actions that will negatively effect the education of the child, or fiscal burden of the parent.</p> <p>This policy should not burden school or county, as it can be added to the screening already in place for immunizations. There is a WVEIS Health app now available that includes a check mark box for dental.</p> <p>This policy addresses a gradual phase in period to assist in not over</p>	N/+	

burdening the systems; payer, dental provider, school and state oral health program.

This policy is supported by the WV Dental Association, WV Dental Hygienist Association, WV Oral Health Coalition, Claude W. Benedum Foundation, WVU School of Dentistry, Marshall University School of Medicine, along with many policy-makers and other organizations.

Reiterates the importance of quality care and the need to follow best practice and guidelines. Thank you for the extra care and effort to insure good oral health of our citizens.

03-24	Mary Beth Shea, RDH, BA Oral Health Coordinator Mid-Ohio Valley Health Dept. Parkersburg WV	This policy would be a great achievement in addressing access to care for children's oral health in WV. It has the potential to greatly impact utilization of dental benefits. It provides a safety net for those few children without dental coverage. Many other states require dental screenings and would be a great step forward for West Virginia.	N/+
03-25	Molly Bauer Parkersburg 26101	This policy changes the Communicable Disease Policy title to Health Promotion and Disease Prevention in addition to requiring dental exams. I support this.	N/+
04-03	Ron Stollings Chairman, Committee on Health & Human Resources Senate of WV Charleston West	I am writing in support of the change in the Health Promotion and Disease Prevention Policy. As an advocate of oral health care, this is a much needed update to the current policy. Oral health education and care are imperative to a child's health. Providing children with access to care will not only be teaching them a life long habit, but will be an overall improvement to their health. Again, I fully support his change, and am excited to see the progress this change will bring.	N/+

		<p>Your Board is to be commended for its “Health Promotion and Disease Prevention” initiative contained in your proposed Policy 2423. It is especially rewarding to see the purpose of your Policy includes a “dental home” in the working relationships with schools, parents and other stakeholders. Reports over the years reveal children miss more schools days because of dental problems than any other disease. Your initiative will go a long way to reverse this disparity.</p>	
04-03	<p>Richard Stevens Executive Director WVDA Charleston West</p>	<p>WVDA is pleased to extend its support for the Policy in its call for improving the oral health of our State’s children which is essential to improving their overall health and learning. Your Policy will be the single greatest achievement to improve children’s access to oral health our State will have ever undertaken.</p> <p>WVDA is encouraged about the implementation of your Policy 2423, and offers any assistance it may render to help assure its success. I am pleased to have met with you and your staff in 2013 to assist with the development of this worthwhile project.</p>	N/+
04-04	<p>Dr. Michael A. Hazey III DDS, MS Specialists in Orthodontics Bridgeport WV</p>	<p>Please implement Policy 2324 requiring dental examinations of children by dentists prior to Pre-K/Kindergarten, 2nd grade, and 12th grade.</p>	N/+
04-07	<p>Dr. Steven A. Ghareeb DDS Ghareeb Dental Group South Charleston WV</p>	<p>Please implement Policy 2423 requiring dental examinations of children by dentists.</p>	N/+
04-07	<p>Dr. Ted Leslie DDS Cosmetic and Family Dentistry</p>	<p>Please implement Policy 2423 requiring dental examinations of children by dentists.</p>	N/+

Martinsburg WV

04-11	Brenda Isaac Lead School Nurse Kanawha County Schools Charleston WV	Much more holistic approach. I appreciate adding Health Promotion. I don't agree with the \$0 fiscal note. The monitoring of the additions to the policy will require 100's of man hours of staff time, most likely and most appropriately school nurse time. I support the additions but want to point out the reality of the increased work that this will put on the school health staff and other school staff.	N/+	Existing staff will monitor the dental exam requirements. It is recognized that staff time may be extended for reviewing for dental exams however no new staff should be needed. Currently schools assess HealthCheck/ Immunization status for Pre-K and Kindergarten and immunization status at 7th & 12th grade which is the same timeframes for dental exams with the exception of grade 2.
04-13	Rebecca Day DDS Drs. Veltri, Day & Veltri Clarksburg WV	Your Board is to be commended for its "Health Promotion and Disease Prevention" initiative contained in your proposed Policy 2423. It is especially rewarding to see the purpose of your Policy includes a "dental home" in the working relationships with schools, parents and other stakeholders. Reports over the years reveal children miss more school days because of dental problems than any other disease. Your initiative will go a long way to reverse this disparity.	N/+	
04-13	S. Vincent Veltri DDS Drs. Veltri, Day & Veltri	I am pleased to extend my support of the Policy in its call for improving the oral health of our State's children which is essential to improving their overall health and learning. Your Policy will be the single greatest achievement to improve children's access to oral health our State will have ever undertaken.	N/+	
		Your Board is to be commended for its "Health Promotion and Disease Prevention" initiative contained in your proposed Policy 2423. It is especially rewarding to see the purpose of your Policy		

Clarksburg WV	<p>includes a "dental home" in the working relationships with schools, parents and other stakeholders. Reports over the years reveal children miss more school days because of dental problems than any other disease. Your initiative will go a long way to reverse this disparity.</p> <p>I am pleased to extend my support of the Policy in its call for improving the oral health of our State's children which is essential to improving their overall health and learning. Your Policy will be the single greatest achievement to improve children's access to oral health our State will have ever undertaken.</p> <p>Your Board is to be commended for its "Health Promotion and Disease Prevention" initiative contained in your proposed Policy 2423. It is especially rewarding to see the purpose of your Policy includes a "dental home" in the working relationships with schools, parents and other stakeholders. Reports over the years reveal children miss more school days because of dental problems than any other disease. Your initiative will go a long way to reverse this disparity.</p>		
04-13	<p>Gerald A. Vletri DDS Drs. Veltri, Day & Veltri Clarksburg WV</p>	<p>I am pleased to extend my support of the Policy in its call for improving the oral health of our State's children which is essential to improving their overall health and learning. Your Policy will be the single greatest achievement to improve children's access to oral health our State will have ever undertaken.</p>	N/+
04-14	<p>Daniel I. Joseph DDS Wheeling WV</p>	<p>I am writing to express my support.</p>	N/+
04-14	<p>Manny Velez DDS Wheeling WV</p>	<p>I am writing to express my support of Policy 2423.</p>	N/+

04-14	Douglas N. Robertson DDS Wheeling WV	I am writing to express my support of Policy 2423.	N/+
04-14	Katie Steele DDS Wheeling WV	I am writing to express my support of Policy 2423.	N/+
04-14	Phillip D. High DDS Wheeling WV	I am writing to express my support of Policy 2423.	N/+
04-14	Erin Miller DDS Wheeling WV	I am writing to express my support of Policy 2423.	N/+
04-14	Michael D. Medovic DDS Wheeling WV	I am writing to express my support of Policy 2423.	N/+
04-14	Amber Bauer DDS Wheeling WV	I am writing to express my support of Policy 2423.	N/+
04-14	Joy Harr DDS Wheeling WV	I am writing to express my support of Policy 2423.	N/+
04-14	Trey Wilcox DDS Wheeling WV	I am writing to express my support of Policy 2423.	N/+
04-14	Heather Taylor DDS Taylor Family Dentistry	I am writing to express my support of Policy 2423.	N/+

Glen Dale WV

04-14 Elisha J. Nickoles
DDS
Wheeling WV

I am writing to express my support of Policy 2423.

N/+

Please implement Policy 2423 requiring dental examinations of children by dentists. We see firsthand the benefits of early examinations by a dentist on children. Dental disease is prevalent in West Virginia and prevention, examination, and early treatment can make a significant difference in a child's life. The side benefit would also be better academic performance and few absences.

04-14 Brett E. Eckley
DDS
Eckley Orthodontics
Beckley WV

It is our belief that a licensed dentist should perform these exams so that the proper professional (who can diagnose and treat) is in charge. We have a very successful examination program in southern West Virginia for second graders and believe this program has made a difference in our children's lives.

N/+

Edit: "Section 7.1, Quality Assurance for School-Based Services, was added to set forth the expectations that any screenings, examinations and disease prevention measures provided by the school will be delivered in accordance to appropriate standards of practice and care, laws and regulations to ensure the safety of the students served in schools; and"

04-14 Kelli Caseman
Executive Director
West Virginia School-
Based Health Assembly
Charleston WV

Additional text: "Quality Assurance for School-Based Health Center Services (SBHCs) was added to set forth the expectation that centers and county boards of education will enter into a Memorandum of Understanding that identifies appropriate standards of practice and care, as already established by the sponsoring agency that provides the medical services in the SBHC, prior to providing services."

A/+

The services being referenced are not school-based health center only but community services being provided within the school. The following information is added in response: "The terms regular and ongoing services as referenced refer to community services that are provided within the school in an agreed upon manner between the school and community partner(s) which work toward promoting both the academic, health and social service

needs of students”.

§126-51-2 Purpose

03-24	Mary Beth Shea, RDH, BA Oral Health Coordinator Mid-Ohio Valley Health Dept. Parkersburg WV	Provide continuity of care to all children in WV with regards to oral health.	N/+
04-11	Brenda Isaac Lead School Nurse Kanawha County Schools Charleston WV	Wording emphasizes a much more holistic approach. I strongly agree that we need to set standards of care to support student success.	N/+

§126-51-3 Application

03-24	Mary Beth Shea, RDH, BA Oral Health Coordinator Mid-Ohio Valley Health Dept. Parkersburg WV	There are no punitive actions that will negatively effect the education of the child, or fiscal burden of the parent. This policy should not burden school or county as it can be added to the screening already in place for immunizations. There is a WVEIS Health Application now available that includes a check mark box for dental.	N/+	
04-11	Brenda Isaac Lead School Nurse Kanawha County Schools Charleston WV	3.2 Applaud the proactive approach. 3.3 Please stress the role of the school nurse here. The only person fully qualified to coordinate and lead the implementation of this policy.	A/+	Add to Section 3.3: “The school nurse is qualified to lead the development and implementation of the county level policy”.

§126-51-4 Definitions

03-24	Mary Beth Shea, RDH, BA	This policy addresses a gradual phase in period to assist in not over burdening the systems: payer, dental provider, school and State Oral	N/+
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	<p>Oral Health Coordinator Mid-Ohio Valley Health Dept. Parkersburg WV</p>	<p>Health Program.</p>		
04-03	<p>Richard Stevens Executive Director WVDA Charleston West</p>	<p>WVDA is especially supportive of Section 4.14 “HealthCheck” which calls for early and periodic oral health screening, diagnosis and treatment. Many studies show the earlier oral diseases are diagnosed and treated the lower the cost for dental care in a child’s future years.</p> <p>WVDA supports Section 4.19 calling for “oral health exams” including diagnostic services be completed by a dentist who is educated and trained to diagnose and treat oral diseases.</p>	N/+	
		<p>Added Text: “Medical record is the documentation kept about the medical care of patients at a school-based health center or other medical center. Medical records are protected by the Health Insurance Portability and Accountability Act (HIPPA).”</p>	NA	<p>Medical references under HIPAA are not reference under this policy only educational medical records as regulated under FERPA.</p>
04-14	<p>Kelli Caseman Executive Director West Virginia School- Based Health Assembly Charleston WV</p>	<p>Added Text: "School-Based Health Center (SBHCs) is defined as a center that is located on school grounds that provides comprehensive health care services. SBHCs in West Virginia are operated as a partnership between county school systems and community health organizations. This sponsoring organization is responsible for the services and care in the SBHC. Services provided by the SBHC are determined locally through a collaborative approach and agreed upon via a Memorandum of Understanding."</p>	NA	<p>School-Based Health Centers are not directly referenced in Policy 2423</p>
		<p>Added text: “Well Child Exam is a physical and medical assessment that is provided on a scheduled basis for all children under the age of 20. The American Academy of Pediatrics provides comprehensive guidelines on surveillance and screening, but</p>	A/+	<p>Add 4.14. reference to “other comprehensive health screening comparable to the HealthCheck protocol” and “but forms and electronic</p>

protocols and forms often vary.”

documentation may vary”

§126-51-5 Health Promotion through School Screenings/Examinations

03-19 Debra Smith
School Nurse
Tyler County Schools
Middlebourne WV

Most of us as school nurses cover multiple buildings and deal with many medical issues each day. It would be difficult to add tracking dental checks for 2nd, 7th, and 12th grades. We are already looking at health records at school entry, and it would be feasible to check dental records then.

NA/-

Currently schools assess HealthCheck/Immunization status for Pre-K and Kindergarten and immunization status at 7th & 12th grade which is the same timeframes for dental exams with the exception of grade 2.

03-24 Mary Beth Shea, RDH,
BA
Oral Health Coordinator
Mid-Ohio Valley Health
Dept.
Parkersburg WV

Reiterates the importance of quality care and the need to follow best practice and guidelines.

N/+

I believe this policy change would be the single greatest achievement in addressing access to care for children’s oral health.

-This policy has the potential to make a great impact in utilization of dental benefits.

03-25 Molly Bauer
Parkersburg 26101

-This policy provides a failsafe for those few children without dental coverage.

N/+

-There are no punitive actions that will negatively effect the education of the child, or fiscal burden of the parent.

-This will help to provide continuity of care to all children of WV with regards to oral health.

-This policy should not burden school or county, as it can be added to the screening already in place for immunizations. There is a WVEIS Health app now available that includes a check mark box for dental.

-This policy addresses a gradual phase in period to assist in not over burdening the systems; payer, dental provider, school and state oral health program.

-This policy is supported by the WV Dental Association, WV Dental Hygienist Association, WV Oral Health Coalition, Claude W. Benedum Foundation, WVU School of Dentistry, Marshall University School of Medicine, along with many policy-makers and other organizations.

-Reiterates the importance of quality care and the need to follow best practice and guidelines

03-25
Rebecca Erwin
Dental Hygienist
FamilyCare
Charleston WV

I support this. This would be a great tool in early prevention.

N/+

What is the WVDHHR – Oral Health Disease Prevention Project?
Who will be responsible for the monitoring of the dental exam record? Where will the information be recorded and by whom?

03-26
Nancy LaBrosse
School Dental Hygienist
Ohio County Schools
Wheeling WV

NA/-

Each school will determine how they will monitor for dental exams and who will input the collected data. Currently schools assess HealthCheck/Immunization status for Pre-K and Kindergarten and immunization status at 7th & 12th grade which is the same timeframes for dental exams with the exception of grade 2. Currently the WV Education

For those students not having the dental exams, who will follow through with the parents to have a dental assessment completed? Who can do the dental assessment?

If operative dentistry needs to be provided, since the dental assessment is at no cost, who provides that and assumes the cost?

Does the provider of any of the services need to be credentialed through Scion Dental? If so, what happens if there are not enough providers to take on that task?

Has the WV Dental Association weighed in on this policy?

Information System (WVEIS) includes an oral health component along with an iDevice Health App which could also be used for the oral health exam data entry.

The local school board can develop a policy that would work in conjunction with the WVDHHR-OHP. The dental assessment can be conducted as guided by the WV Disease Prevention Manual. This could be a dentist or public health hygienist.

Over 80% of WV children have access to dental insurance coverage. It is expected that the remaining 20% will be eligible for coverage under health care reform.

If dental providers want to get reimbursed they will have to be credentialed.

The policy is supported by the WV Dental Association, the WV Dental Hygienist Association, WVU School of Dentistry, as well as many

other entities.

7.1 addresses services should follow best practices and guidelines that are evidence-based or a promising practice and follow best practices and guidelines

The statement of Quality Assurance for School-based Services needs further explanation and examples.

-This policy change would be the single greatest achievement in addressing access to care for children's oral health.

-This policy has the potential to make a great impact in utilization of dental benefits.

-This policy provides a failsafe for those few children without dental coverage.

-There are no punitive actions that will negatively effect the education of the child, or fiscal burden of the parent.

-This will help to provide continuity of care to all children of WV with regards to oral health.

-This policy should not burden school or county, as it can be added to the screening already in place for immunizations. There is a WVEIS Health app now available that includes a check mark box for dental.

-This policy addresses a gradual phase in period to assist in not over burdening the systems; payer, dental provider, school and state oral health program.

-This policy is supported by the WV Dental Association, WV Dental Hygienist Association, WV Oral Health Coalition, Claude W. Benedum Foundation, WVU School of Dentistry, Marshall

N/+

03-28

Cynthia Keely, BA, RRT,
LRTR
President-Elect
WV Society for
Respiratory Care
Charleston WV

University School of Medicine, along with many policy-makers and other organizations.

-Reiterates the importance of quality care and the need to follow best practice and guidelines

03-30	Bobbi Muto Community Oral Health and Dental Sealant Coordinator Marshall University School of Med Hurricane WV	Great to see that WV will finally be inline with National Standards regarding standardized dental exams/assessments. This could be the single greatest policy with the most positive impact on improving children's dental health statewide. This is a no-brainer and I can't imagine anyone opposing it.	N/+
03-30	Mike Muto Dentist Teays Dental Care Hurricane WV	I support this policy change and I am glad to see the WVBOE stepping up to promote oral health through examinations.	N/+
03-30	Georgia Steele Grandparent St. Marys WV	I think this will help so many children. I see lots of bad smiles and decayed teeth when I volunteer at the schools and so many times I wonder if the parents even realize what is going on inside their child's mouth. This policy will help educate along with get those kids the services they need.	N/+
04-03	Richard Stevens Executive Director WVDA Charleston West	WVDA also supports Section 5.1 which, in part, calls for biannual dental examinations by a licensed dentist. This will help assure continuity of dental care to all West Virginia children. WVDA supports Section 5.2 calling for children to provide written evidence of examinations by dentists at Pre-K, Kindergarten, and grades 2, 7 and 12. This helps assure children are receiving appropriate dental examinations. This policy should not burden school nurses or personnel as it can be a part of the screening already in place for	N/+

immunizations and other tests. There is a WVEIS Health app now available that includes a check box for dental. Should a child not have evidence of an exam, there is no punitive action that will negatively affect the education of the child or financial burden on the parent(s).

Your Policy 2324 provides for a gradual phase-in of these periodical exams over a four (4) year period, thus not burdening school's administrative systems, payers and dentists.

There is minimal financial impact on parents as a significant majority of children have benefits under federal and state programs, private insurance and the Affordable Care Act which pay for dental services. Additionally, your Policy provides "safe harbor" in Section 5.3 for those children unable to present proof of an oral health exam by enrolling them in the Oral Disease Prevention Project to receive an oral health assessment regardless of their ability to pay.

04-04	Wendy Mosteller Regional Oral Health Coordinator MU School of Medicine Sod WV	I am in support of Policy 2423-Communicable Disease Control. Oral Health is a vital part to our overall health. To ensure that our children across this state are given the best opportunity to have good overall health in the future, dental exams need to be included in early detection and prevention.	N/+
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Policy 2423

04-04	Marsha DeLancey Regional Oral Health Coordinator Region 3 MU Waverly WV	I am fully in support of policy 2423. I think the addition of the newly proposed dental examinations will be a very good thing. Early detection of disease is vital. Many complications can be avoided when the disease conditions are detected during their earlier stages. When children are experiencing dental pain the symptoms can be so agonizing that it prohibits the child from concentrating and even worse, can cause the child to miss school all together. Healthy children will perform better in school and avoid loss of	N/+
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		instructional time due to issues with dental pain.	
04-04	Jamie Justice Sod WV	I strongly support mandatory dental exams and cleanings for school children. Absolutely!!!	N/+
04-04	Rebecca Fleming Pecks Mill WV	Mandatory dental screenings are very important for every school age child. They should be provided through the school system. For some children, the school system is the only time they will have a dental visit.	N/+
04-04	Mary Phipps FNP,BC Logan WV	I am in favor and strongly support this policy.	N/+
04-04	Steven Justice Sod WV	I support dental exams for school children.	N/+
04-04	Kim Hall LPN Logan WV	I AM STRONGLY IN FAVOR AND SUPPORT THIS	N/+
04-04	HEATHER NAPIER LOGAN WV	I SUPPORT THIS POLICY AND THINK IT SHOULD BE IMPLEMENTED	N/+
04-09	Ashley Dental Hygienist Logan Oak Hill WV	As a parent of 3 children and a dental hygienist who has worked in the school setting providing preventive oral health services for the past 6 years, I am in complete support of mandating dental exams for our children. This will allow dental disease to be diagnosed on those children that may not have not ever had the opportunity to see a dentist, and hopefully get them referred to a dental home to achieve optimal oral health. Dental decay is such a common health concern that is so often overlooked. Children will miss many school hours and have the inability to concentrate in school due to pain in their teeth. We have to remember that our mouth is connected to the rest of our body, and should be just as important as the rest of our	N/+

health.

5.1 Excellent Health Promotion approach. Partnerships should be coordinated and monitored by the certified school nurse, to insure that standards are met and maintained and school policies and laws (i.e. FERPA) are understood and followed.

A/+

Add to Section 5.1: "The school nurse is the school health expert who is qualified to lead the coordination and monitoring of health promotion through school screenings and examinations."

5.3 While I totally agree with the concept of insuring a dental home and adequate oral health checks, why are we mandating specific grade level examinations for oral health but not for the Well Child Checks? I am not sure the policy of forcing parents to comply, and if they cannot afford private care, forcing them to use the care the state is providing, is the best way to encourage and educate parents and students in the importance of taking this responsibility.

NA/+

Although we agree with this comment, we will need to work on gaining stakeholders support in the future.

04-11
Brenda Isaac
Lead School Nurse
Kanawha County Schools
Charleston WV

Monitoring this mandate also puts a huge burden on the schools and the school health services staff. We are not forcing compliance with yearly well child checks even though it has been proven to promote wellness and decrease disease but we are with oral health. Should we not be promoting and educating on both and assisting parents to find medical and dental homes, while helping parents and students to understand that the ultimate responsibility is theirs, not that of a "mommy state"? We are taking responsibility and choice away from the parents.

NA/-

Currently schools assess HealthCheck/Immunization status for Pre-K and Kindergarten and immunization status at 7th & 12th grade which is the same timeframes for dental exams with the exception of grade 2. It is expected that requesting exams will increase understanding of the importance of prevention.

5.4 We need to follow CDC standards not antiquated law when it comes to TB testing.

NA/-

WVDHHR is currently reviewing state TB laws.

04-14	Kelli Caseman Executive Director West Virginia School- Based Health Assembly Charleston WV	5.2 We recommend that you re-title this section "Well Child Exams." The term "HealthCheck" is the name of the state's EPSDT program. The word is not synonymous with "Well Child Exam."	NA/-	The term "HealthCheck" is in alignment with the Governor's KidsFirst initiative, WV Medicaid, CHIP standard of practice and WVBE Policy 2525. Reference Edward Schor article on Medicaid: Health Promotion and Disease Prevention for School Readiness. Also within section 5.2 other comprehensive health screening, is acceptable, as long as comparable to the HealthCheck protocol.
04-14	Margaret Chapman Pomponio Executive Director WV FREE Charleston West	In §126-51-5.1, schools are to promote annual "well child examinations." These should be defined in the previous section to include optional screening for STDs and pregnancy, questioning about sexual/relationship risk factors, and offering HPV vaccine.	NA	The American Academy of Pediatrics as well as WV HealthCheck recommends a well child exam that includes an age appropriate risk assessment. HPV is included as a recommended vaccine by ACIP and CDC for adolescents.
§126-51-6 Disease Prevention Measures through Immunizations				
04-14	Margaret Chapman Pomponio Executive Director WV FREE Charleston West	The WV Statewide Immunization Information System (WVSIIS), the statewide electronic data system for reporting and tracking administrations of vaccines, does not include HPV in its reporting sheet, nor does it list HPV vaccines in its forecast of recommended vaccinations. Our recommendation is for WVSIIS to include HPV vaccines in its reporting, despite not being compulsory.	NA	HPV is included in WVSIIS per Jeff Neccuzzi, Director Division of Immunization Services, WVBPH. HPV is included in patient reports, provider reports and for vaccine forecasting. HPV is

Rationale:

o Human papillomaviruses (HPV) cause a large number of cancers of the mouth and throat, cervix and genital organs. HPV are the most common sexually transmitted viruses in the United States, and the highest prevalence of HPV infection is found in sexually active adolescents and young adults.

o In a revised policy statement, the American Academy of Pediatrics (AAP) updates its recommendations for the use of HPV vaccine in both males and females. The statement, "HPV Vaccine Recommendations," is published in the March 2012 Pediatrics and provides the rationale and background to support the HPV vaccine recommendations in the 2012 Adolescent Immunization Schedule (published Feb. 1). The AAP recommends routine HPV vaccination of males and females at 11-12 years of age. The vaccine is most effective if administered before the onset of sexual activity, and antibody responses to the vaccine are highest at ages 9 through 15 years. Immunization of children against HPV infection will help prevent cancers and genital warts caused by HPV.

o The Bureau for Public Health is the state agency responsible for establishing vaccine requirements for students and best practices for health and wellness (§126-51-4.6). The WV DHHR Bureau for Public Health's recommendation for HPV vaccinations are the CDC's (11-12 years old for boys and girls).

not included on the certificate of immunization for school entry because it is not a requirement entry. HPV may be marked confidential and not shared.

§126-51-7 Quality Assurance for School-Based Services

03-14	Jason Roush Ripley WV	It appears that section 7.1.c. was left out of the current proposed rule. 7.1.c should read: Oral Health services shall incorporate the protocols set forth by the WVDHHR-OHP.	A/+	Accepted as written
03-31	Ruth Bland Director of Special Education/Technology Coordinator Pocahontas County Board	It seems that the importance of CyberSafety needs to be communicated in this policy. I realize it is in 2470 and in each individual district's AUP, but the need to emphasize CyberSafety daily, weekly, and monthly needs to be strongly communicated to our instructors. Doing a CyberSafety lesson once per year is not an	NA	CyberSafety is not included in Policy 2423

of Education
Marlinton West

effective strategy in getting the message to the students, parents,
and instructors.

04-11

Brenda Isaac
Lead School Nurse
Kanawha County Schools
Charleston WV

7.1 Absolutely we need to follow high standards for services performed by community groups within the school setting. Schools need very specific guidelines for insuring this. There should be a professional school employee appointed and given the responsibility for coordination and monitoring of this on the school level. This person should have a health background and a thorough knowledge of school law and school policies. A/+

Included in 5.1. "The school nurse is the school health expert who is qualified to lead the coordination and monitoring of health promotion through school screenings and examinations."

We recommend deleting- "All community services performed in the school setting should be regular and ongoing services that are evidence-based or a promising practice and follow best practices and guidelines." A/+

The services referenced are community services such as health services/health promotion/education/physical activity provided within the school. The following information is added in response: "Regular as referenced refers to community services that are provided with in the school in an agreed upon manner between the school and sponsoring community which work toward promoting both the academic, health and social service needs of students". Each community service is responsible for ensuring they are following best practices and guidelines.

04-14

Kelli Caseman
Executive Director
West Virginia School-
Based Health Assembly
Charleston WV

And replacing with: "All health care services performed by community organizations in the school setting should follow best practice standards of care, as identified by the agency sponsoring the services, agreed upon by the county school system, and noted in the Memorandum of Understanding."

We recommend deleting: "HealthCheck exam shall incorporate the protocols set forth by AAP-Bright Futures and WVDHHR-Health Check Program."

NA/-

And replacing with: "Well Child exams should be based on the recommendations set forth by the American Academy of Pediatrics. Protocols and forms vary."

The term "HealthCheck" is in alignment with the Governor's KidsFirst initiative, WV Medicaid, CHIP standard of practice and WVBE Policy 2525. Reference Edward Schor article on Medicaid: Health Promotion and Disease Prevention for School Readiness. Also within section 5.2 other comprehensive health screening, is acceptable, as long as comparable to the HealthCheck protocol.

§126-51-8 Disease Prevention Measures Through Practice and Education

03-24	Mary Beth Shea, RDH, BA Oral Health Coordinator Mid-Ohio Valley Health Dept. Parkersburg WV	This policy is supported by the WV Dental Association, WV Dental Hygienists Association, WVU School of Dentistry, Marshall University School of Medicine, along with many policy-makers and other organizations.	N/+
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04-11	Brenda Isaac Lead School Nurse Kanawha County Schools Charleston WV	8.1 Excellent and well stated. The best disease prevention measure around.	N/+
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04-14	Margaret Chapman Pomponio Executive Director WV FREE	In §126-51-8.3, educational inservice on the prevention, transmission and treatment of current communicable diseases shall include, but not limited to, HIV and AIDS, shall be provided to all school personnel every two years by the county boards of education,	NA
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Each local education agency determines how inservices will be provided and completed.

Charleston West

as specified in WV Code §18-2-9 and §18-5-15d. §18-5-15d also indicate that parents should be encouraged to come. These policies do not indicate who is responsible for offering the inservices, or how long they should be. Our recommendation would be to designate a specific agency that would be responsible for designing and delivering bi-annual inservice trainings.

§126-51-9 Disease Control Measures

03-24 Mary Beth Shea, RDH,
BA
Oral Health Coordinator
Mid-Ohio Valley Health
Dept.
Parkersburg WV

This policy will enhance and increase participation in existing school based prevention programs placing dental sealants. Most dental disease is preventable and less costly to treat if caught early. Dental disease cannot be detected without screenings or exams.

N/+

04-14 Margaret Chapman
Pomponio
Executive Director
WV FREE
Charleston West

In section 9.5, the policy states that “Mandatory screening for communicable diseases that are known not to be spread by casual contact is not warranted as a condition for school entry or for employment or continued employment, nor is it legal based on W. VA. Code §16-3C-1. All screenings performed in the public school setting should be age appropriate deemed effective and necessary through evidence-based and scientific researched-based practice...” This means that there cannot be mandatory screenings of HIV, HPV, or other STDs for students or school personnel, OR compulsory HPV vaccinations. However, offering HPV vaccines is not prohibited.

NA

The students Primary Care Provider works with the student and their family to ensure their immunizations are up to date and the school system verifies required vaccines have been administered. HPV is an optional vaccine and would be administered at the primary care provider’s office, if student and/or family requests. Vaccines are not routinely administered by public schools.

§126-51-10 Confidentiality

04-14 Kelli Caseman
Executive Director
West Virginia School-
Based Health Assembly
Charleston WV

Added text: "Medical records are not part of the education record or health record and are protected by HIPPA."

A/+

This section refers to medical information related to the school system that is part of the educational record under FERPA NOT the community partner providing medical services at the school which fall under their confidentiality laws which is HIPAA. Clarification was added:

10.1 All "school personnel"

"The only exception is immunizations as referenced in section 6.1"

10.2 "Health information, provided to or from the school," is part of the educational record . . .