

REGULATION MONTGOMERY COUNTY PUBLIC SCHOOLS

Related Entries: JPA-RA
Responsible Office: Chief Academic Officer
Chief Operating Officer

Safety and Screening Programs: Lead, Hearing, and Vision

I. PURPOSE

To comply with state and federal requirements to screen and identify students at risk for lead poisoning.

To comply with state requirements to screen and identify students with auditory or visual problems, to refer and follow-up on children who failed auditory and/or visual screening, and to interpret screening results to appropriate individuals.

To comply with state and federal guidelines regarding the safety of school and office drinking water.

II. BACKGROUND

Screening procedures are part of the overall health appraisal of children. Children most likely to be in need of further medical appraisal or investigation are identified through teacher observations, health histories, screening tests, and medical and psychological tests and examinations.

Lead poisoning from exposure to lead contaminants is a widespread environmental hazard. Children are at greatest risk from birth to age six while their neurological systems are developing. Sustained exposure to lead can cause long-lasting neurological damage and death. Effects of exposure to lead in the environment include learning disabilities, shortened attention span, irritability, and lowered IQ.

Hearing and vision problems are health concerns and can be barriers to learning. Screening allows for early detection of any problems.

III. DEFINITIONS

- A. *Lead poisoning screening* is a strategy used by health care providers to identify lead poisoning risk by asking a series of questions from a lead risk questionnaire and/or drawing a blood sample to measure the amount of lead in the blood.
- B. *At-Risk Area* is an area designated by the Maryland Department of Health (MDH) *Targeting Plan for Areas at Risk for Childhood Lead Poisoning*. The at-risk areas for children born before January 1, 2015, are noted on the Maryland Department of Health and Mental Hygiene (DHMH) Blood Lead Testing Certificate, DHMH 4620 (DHMH Form 4620). Effective March 26, 2016, the at-risk areas for children born after January 1, 2015, are defined in the *Maryland Targeting Plan for Areas at Risk for Childhood Lead Poisoning, October 2015*, (2015 Targeting Plan) as all ZIP codes and census tracts in the State of Maryland.

IV. PROCEDURES

- A. Lead Poisoning/Screening
 - 1. For students entering Montgomery County Public Schools (MCPS) Head Start or general prekindergarten, the DHMH Form 4620 must be completed certifying that the student has undergone blood testing and/or screening for lead poisoning, consistent with federal and state requirements.
 - 2. For students entering MCPS special education pre-school programs, kindergarten or first grade, the DHMH 4620 must be completed, consistent with state requirements.
 - a) If the child was born before January 1, 2015, and never resided in an at-risk area noted on the Maryland DHMH Form 4620, the parent/guardian completes the section of DHMH Form 4620 certifying the child never lived in an at-risk area.
 - b) Effective March 28, 2016, if the child was born after January 1, 2015, resides, or is known to have previously resided, in an at-risk area in Maryland as identified in the 2015 Targeting Plan, the child's health care provider must complete DHMH Form 4620 (or an electronic report of the child's blood lead analysis), certifying that the child has been screened and/or has undergone blood testing for lead poisoning during the 12-month visit and again during the 24-month visit.

- c) Effective March 28, 2016, a health care provider for a child who is 24 months old or older and younger than 6 years old who resides, or who is known to have previously resided, in an at-risk area shall administer a blood test for lead poisoning if,
 - (1) the child has not previously received a blood test for lead poisoning; or,
 - (2) the child's parent/guardian fails to provide documentation that the child has previously received a blood test for lead poisoning, or,
 - (3) the health care provider is unable to obtain the results of a previous blood lead analysis.
- d) In October of every school year, School Health Services (SHS) will provide a follow-up letter to noncompliant parents/guardians of students in special education prekindergarten, kindergarten, and Grade 1. The letter shall state that the parent/guardian is required by law to provide the certified documentation of the child's blood lead test or the DHMH Form 4620 with Box C (religious exemption) completed and signed.

B. Hearing and Vision Screening

- 1. The school community health nurse (SCHN) and principal are responsible for planning for the hearing and vision screening of all students entering MCPS, entering Grade 1, and entering Grade 8 or Grade 9, and special education students of comparable age to those grades unless evidence is presented that the student was tested by an optometrist or ophthalmologist within the past year. Students referred with symptoms of hearing or vision problems also will be screened.
- 2. Screening will be performed in the schools. A room shall be provided for hearing and vision screening and shall be as quiet as possible for the hearing screening tests and with space and lighting as needed for the vision screening tests. The screenings are completed by members of the School Health Services Hearing and Vision Screening Team.
- 3. The SCHN sends the parent/guardian of each student the results of the hearing and vision screenings, the educational materials as required by state law, and additional information if the student fails the vision screening, including a recommendation that the student be tested by an optometrist or ophthalmologist and other information required by law. The results of the

hearing and vision screenings are documented on the Student Record Card 5 Health Screenings (MCPS Form SR-5) and are made a part of the permanent record file of each student.

The SCHN answers questions about the referral or links families with community resources as needed.

4. A parent/guardian may object in writing to the screenings on the grounds that it conflicts with their religious beliefs.
5. The SCHN shares significant findings with school staff as needed.
6. School staff should refer to the School Health Manual (SHM) for more specific screening procedures.

V. Safety of Drinking Water

- A. MCPS monitors the safety of school drinking water through implementing U.S. Environmental Protection Agency (EPA) technical guidance for testing protocols and other proactive measures for school drinking water. In addition, MCPS also complies with regulations issued by the Maryland Department of the Environment including periodically testing all drinking water outlets on a three-year cycle.
- B. MCPS works with partner agencies at the state and county level to design and implement best practices to maintain safe drinking water, including fixture remediation, flushing protocols, and education efforts.
- C. MCPS makes information publicly available about the drinking water testing programs and results.

Related Source: *Code of Maryland Regulations* §10.11.04.02, .04-.06; § 26.16.07 *Annotated Code of Maryland*, Education Article, §7-404, *Annotated Code of Maryland*, Environment Article § 6-1501; U.S. Environmental Protection Agency (EPA) Technical Guidance for Testing Protocols

Regulation History: Formerly Regulation No. 525-8, revised October 1982, revised October 2, 2008, revised August 13, 2009, revised October 17, 2018.