



SEALS Health News

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Back-to-School Tips The following health and safety tips are from the American Academy of Pediatrics (AAP) Making the first day easier:

Many children become nervous about new situations, including changing to a new school, classroom or teacher. This may occur at any age. If your child seems nervous, it can be helpful to rehearse entry into the new situation. Take them to visit the new school or classroom before the first day of school.

Teachers know that students are nervous and will make an extra effort to make sure everyone feels as comfortable as possible.

If your child seems nervous, ask them what they are worried about and help them problem solve ways to master the new situation.

Point out the positive aspects of starting school to create positive anticipation about the first day of class. They will see old friends and meet new ones.

The best time to get help might be one to two weeks before school opens.

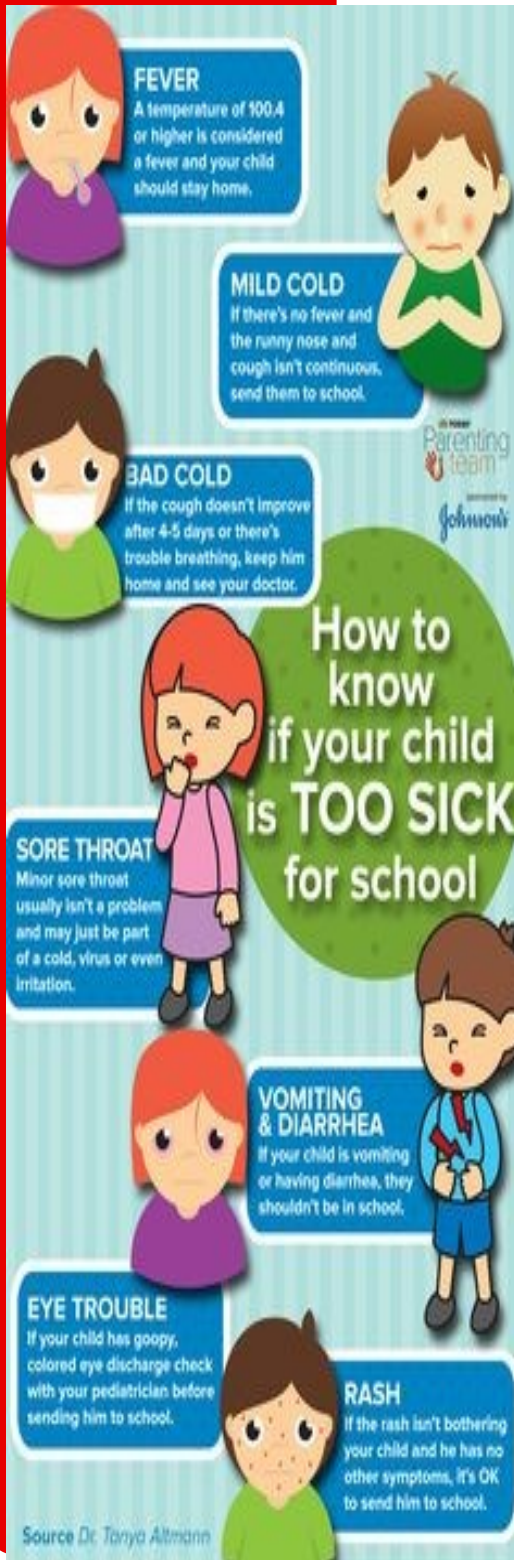
Make sure to touch base with your child's new teacher at the beginning or end of the day so the teacher knows how much you want to be supportive of your child's school experience.

Consider starting your child on their school sleep/wake schedule a week or so ahead of time so that time change is not a factor on their first couple of days at school.



Illness

Traveling To & From School



Review the basic rules with your student and practice any new routes or modes of transportation:

School Bus

Children should always board and exit the bus at locations that provide safe access to the bus or to the school building.

Remind your child to wait for the bus to stop before approaching it from the curb.

Make sure your child walks where she can see the bus driver (which means the driver will be able to see her, too).

Remind your student to look both ways to see that no other traffic is coming before crossing the street, just in case traffic does not stop as required. Encourage your child to actually practice how to cross the street several times prior to the first day of school.

Your child should not move around on the bus.

Eating on the bus can present a problem for students with allergy and also lead to infestations of insects and vermin on the vehicles.

If your child has a chronic condition that could result in an emergency on the bus, make sure you work with the school nurse or other school health personnel to have a bus emergency plan, if possible, prior to the first day of class

Bike

Practice the bike route to school before the first day of school to make sure your child can manage it.



Always wear a bicycle helmet, no matter how short or long the ride.

Ride on the right, in the same direction as auto traffic and ride in bike lanes if they are present.

Use appropriate hand signals.

Respect traffic lights and stop signs.

Wear bright-colored clothing to increase visibility. White or light-colored clothing and reflective gear is especially important after dark.



Traveling To & From School

Car

All passengers should wear a seat belt or use an age- and size-appropriate car seat or booster seat.

Your child should ride in a belt-positioning booster seat until the vehicle's seat belt fits properly (usually when the child reaches about 4' 9" in height and is between 8 to 12 years of age). This means that the child is tall enough to sit against the vehicle seat back with her legs bent at the knees and feet hanging down and the shoulder belt lies across the middle of the chest and shoulder, not the neck or throat; the lap belt is low and snug across the thighs, not the stomach.

All children younger than 13 years of age should ride in the rear seat of vehicles. If you must drive more children than can fit in the rear seat (when carpooling, for example), move the front-seat passenger's seat as far back as possible and have the child ride in a booster seat if the seat belts do not fit properly without it.

Remember that many crashes occur while novice teen drivers are going to and from school. You should require seat belt use, limit the number of teen passengers, and do not allow eating, drinking, cell phone conversations even when using hands-free devices or speaker-phone, texting or other mobile device use to prevent driver distraction.. Familiarize yourself with your state's graduated driver's license law and consider the use of a parent-teen driver agreement to facilitate the early driving learning process.



Walking to School

Children are generally ready to start walking to school at 9 to 11 years of age.

Make sure your child's walk to school is a safe route with well-trained adult crossing guards at every intersection.

Identify other children in the neighborhood with whom your child can walk to school. In neighborhoods with higher levels of traffic, consider organizing a "walking school bus," in which an adult accompanies a group of neighborhood children walking to school.



Be realistic about your child's pedestrian skills. Because small children are impulsive and less cautious around traffic, carefully consider whether or not your child is ready to walk to school without adult supervision. If the route home requires crossing busier streets than your child can reasonably do safely, have an adult, older friend or sibling escort them home.

If your children are young or are walking to a new school, walk with them or have another adult walk with them the first week or until you are sure they know the route and can do it safely. If your child will need to cross a street on the way to school, practice safe street crossing with them before the start of school.

Bright-colored clothing or a visibility device, like a vest or arm-band with reflectors, will make your child more visible to drivers.



All medication must be brought to school in the original labeled container prepared by the pharmacy or doctor, (i.e., no envelopes, foil, or baggies). The label should include the following:

- ◇ Child's name
- ◇ Name of medication
- ◇ Dosage of medication to be given
- ◇ Frequency of administration
- ◇ Route of administration
- ◇ Name of physician ordering medication
- ◇ Date of prescription



Getting Medicine to School

All medication should be transported to the school by an adult and handed to another adult. Do not allow your child to carry his or her medication unless he or she is old enough and mature enough to handle the responsibility. Also, make sure it is allowed by the school.

Your child should not carry his or her medication during school hours unless you, the doctor, and the school believes it is necessary for immediate access to emergency medication. Younger children are generally not mature enough to self-carry their own medications, but the school should make sure there is immediate access to emergency medications.



All prescription and nonprescription medication (including vitamins) given in school settings require written authorization from your child's doctor, as well as parent written consent. This is a requirement of the rules that school nurses must follow in most states. Ask your school for the medication administration forms they use.

Develop a Sleep Routine

Getting enough sleep is critical for a child to be successful in school. Children who do not get enough sleep have difficulty concentrating and learning as well as they can.



Set a consistent bedtime for your child and stick with it every night. Having a bedtime routine that is consistent will help your child settle down and fall asleep. Components of a calming pre-bedtime routine may involve a bath/shower, reading with them, and tucking them in and saying good-night to them.

Have your child turn off electronic devices well before bedtime.

Try to have the home as quiet and calm as possible when younger children are trying to fall asleep.

Insufficient sleep is associated with lower academic achievement in middle school, high school and college, as well as higher rates of absenteeism and tardiness. The optimal amount of sleep for most younger children is 10-12 hours per night and for adolescents (13-18 year of age) is in the range of 8-10 hours per night.



Developing Good Homework & Study Habits



Create an environment that is conducive to doing homework starting at a young age. Children need a consistent work space in their bedroom or another part of the home that is quiet, without distractions, and promotes study.

Schedule ample time for homework; build this time into choices about participation in after school activities.

Establish a household rule that the TV and other electronic distractions stay off during homework time.

Supervise computer and Internet use.



By high school, it's not uncommon for teachers to ask students to submit homework electronically and perform other tasks on a computer. If your child doesn't have access to a computer or the internet at home, work with teachers and school administration to develop appropriate accommodations.

Be available to answer questions and offer assistance, but never do a child's homework for her.

Take steps to help alleviate eye fatigue, neck fatigue and brain fatigue while studying. It may be helpful to close the books for a few minutes, stretch, and take a break periodically when it will not be too disruptive.

If your child is having difficulty focusing on or completing homework, discuss this with your child's teacher, school counselor, or health care provider.

For general homework problems that cannot be worked out with the teacher, a tutor may be considered.

Some children need extra help organizing their homework. Checklists, timers, and parental supervision can help overcome homework problems.

Some children may need help remembering their assignments. Work with your child and their teacher to develop an appropriate way to keep track of their assignments – such as an assignment notebook.

Selinsgrove Area School District



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Information brought to you by:
CDC
Healthy children.org

BACKPACK SAFETY

**5 Tips to Prevent
Back-to-School
Backpack
Overload**



Back- pack Safety

Choose a backpack with wide, padded shoulder straps and a padded back.

Pack light. Organize the backpack to use all of its compartments. Pack heavier items closest to the center of the back. The backpack should never weigh more than 10% to 20% of your child's body weight. Go through the pack with your child weekly, and remove unneeded items to keep it light.

Remind your child to always use both shoulder straps. Slinging a

backpack over one shoulder can strain muscles.

Adjust the pack so that the bottom sits at your child's waist.

If your school allows, consider a rolling backpack. This type of backpack may be a good choice for students who must tote a heavy load. Remember that rolling backpacks still must be carried up stairs, they may be difficult to roll in snow, and they may not fit in some lockers. And review backpack safety with your child.

The Healthy Way TO WEAR A BACKPACK



A healthy backpack strategy will help your children avoid health problems & avoid pain and strain

PACK IT LIGHT

A 100 lb kid should wear a pack that is 10 lb's or less

Backpacks should not weigh more than 10% of your body weight



*Pack the heaviest items closest to your child's back
Materials should not slide around in the pack*



*Wear both shoulder straps, not just one
Wear straps 2" below shoulder blades to waist level
Wear the waist belt if there is one
The pack should fit snugly on your child's back*

WEAR IT RIGHT

Follow this simple backpack strategy to help with proper posture & avoid back, shoulder & neck aches.



Source: The American Occupational Therapy Association, Inc.



NaturalHealthyConcepts.com