

Jefferson Times

Alyssa Wooten, Principal
Lauren Beith, Secretary
Michele Vinyard, Clerk

October 5, 2015

A note from the Principal ~

Dear Jefferson Families,

I am hoping everyone has enjoyed their weekend. Thank you for dropping off and picking up your children on Glenbriar Circle (for our 6th - 8th graders). The flow of traffic has been much better this past week. Also, we appreciate all of you for your prompt pick up at dismissal time.

We have an ELAC meeting coming up this Friday, October 9th at 7:15 am in the Library. We truly value your input and encourage you to attend. Please contact me if you would like more information.

Our move to the new Jefferson campus will be here before we know it. Currently, we are on track to welcome students to the new campus at 7500 W. Linne Road on Tuesday, January 5, 2016!

The campus looks absolutely stunning, and we are very excited. As we finalize things, we will communicate information regarding the move, safety plans, dates, and any other pertinent issues.

Jefferson would not be the great school it is without fantastic students, wonderful staff, and supportive parents. We are fortunate and look forward to the future!

Our 6th graders are headed to science camp this week. Have fun and enjoy this special time.

Please feel free to contact me at (209) 835-3053 or at awooten@sjcoe.net with any questions or comments.

Sincerely,
Alyssa Wooten, Principal

**WEDNESDAY
OCTOBER 7TH**

**National Walk to
School Day!!!**

**~ VOLLEYBALL INFORMATION ~
~ SCHEDULE ~**

Tuesday: 10/6

3:45 – Jefferson 5th @ Hawkins 6th
4:30 – Jefferson 7th @ Hawkins 8th
2:45 – 4:00 Jefferson 8th **PRACTICE**

Wednesday: 10/7

3:45 – Jefferson 5th @ George Kelly 5th
4:30 – Jefferson 7th @ George Kelly 7th
2:45 – 4:00 Jefferson 8th **PRACTICE**

Thursday: 10/8

2:45 – 3:45 Jefferson 5th **PRACTICE**
2:45 – 4:00 Jefferson 7th **PRACTICE**
2:45 – 4:00 Jefferson 8th **PRACTICE**

ELAC Meeting

When – Friday, October 9th

Where – Jefferson Library

Time – 7:15 a.m.

Need more information – Contact
Mrs. Wooten at awooten@sjcoe.net

Weekly Information

Monday: 10/5 ~ Minimum Day, 1:05 release
Birthday – Mrs. Correll

Tuesday: 10/6 ~ Choir Room 4, 7:00-7:30 a.m.

Wednesday: 10/7 ~ NO ASB MEETING
Birthday – Mr. Abraham

Thursday: 10/8 ~ Choir Room 4, 7:00-7:30 a.m.,
Color Guard 6:00-7:00 p.m.

Friday: 10/9 ~ GREEN & GOLD Spirit
ELAC meeting @ 7:15 a.m. Jefferson library

Don't forget to turn in your BoxTops!



Be Responsible

Do Your Best Each Day - Think Before You Speak

JEFFERSON CREED

Put Others First - Avoid Conflict

~ WORD OF THE WEEK ~

"ENCOUNTER"

en-coun-tered

en-coun-ter-ing

Full Definition of *ENCOUNTER*

transitive verb

- 1 *a* : to meet as an adversary or enemy
b : to engage in conflict with
- 2 : to come upon face-to-face
- 3 : to come upon or experience especially unexpectedly
<encounter difficulties>

intransitive verb

- : to meet especially by chance

2015 CALENDAR

SEPTEMBER

- 2 – Kona Ice 2-3:30pm * Jefferson
- 3 – Kona Ice 2-3:30pm * Monticello
- 11 – PFA Meeting 3:15pm * Monticello**
- 11 – Family Fun Night 4pm-7pm * Pink Turtle
- 16 – Kona Ice 2-3:30pm * Jefferson
- 17 – Kona Ice 2-3:30pm * Monticello
- 30 – Kona Ice 2-3:30pm * Jefferson

OCTOBER

- 1 – Kona Ice 2-3:30pm * Monticello
- 8 – PFA Meeting 3:15pm * Monticello**
- 9 – Movie Night 6:30pm * Monticello
- 14 – Kona Ice 2-3:30pm * Jefferson
- 15 – Kona Ice 2-3:30pm * Monticello
- 16 – Fund Run 9-11:30am * Monticello
- 28 – Kona Ice 2-3:30pm * Jefferson
- 29 – Kona Ice 2-3:30pm * Monticello
- 29 – Family Fun Night 4-9:00pm *Round Table
Pizza

NOVEMBER

- 12 – PFA Meeting 3:15pm * Monticello**
- 18 – Family Fun Night Taqueria La Mexicana
- 19 – Turkey Trot Monticello
- 20 – Turkey Trot Jefferson

DECEMBER

- 1-7 – Candy Gram Orders * M & J
- 17 – Candy Gram Distribution * M & J

Note: Family Fun Nights are subject to change.





Jefferson School District
Human Resources Department
Tuberculosis Testing Requirements

Deadline for Clearance is October 30. You must be cleared in order to volunteer in classroom.

The provisions of Assembly Bill (AB) 1667, which became effective on January 1, 2015, replaces universal tuberculosis (TB) testing for private, parochial, public K-12 school, and nursery school employees and volunteers with a TB risk assessment questionnaire, and if risk factors are identified, would then require TB testing and examination to determine that the person is free of infectious tuberculosis.

If you choose not to do the questionnaire you can take the TB test.

No person shall be employed by the school district unless they have placed on file with the district a certificate of completion for risk assessment questionnaire or certificate from a licensed physician indicating that a tuberculosis examination within the past 60 days shows that they are free from active tuberculosis. The tuberculosis examination shall consist of an approved intradermal tuberculin test. An X-ray of the lungs shall be required only if the intradermal test is positive. Employees with a history of previous positive skin test should follow the instructions below. **There can be no exemptions from this requirement.** (Education Code 49406 and Board Policy)

Continuing Employees and Volunteers: Education Code Section 49406 and the Jefferson School District require all district employees and volunteers to have an intradermal skin test or the certificate of completion for risk assessment questionnaire for the detection of tuberculosis or have taken a chest X-ray every four years.

Transfer From Another School District: According to Education Code Section 49406, persons transferring from another district may fulfill tuberculosis examination requirements in either of the following ways by:

- Producing a certificate of completion for risk assessment questionnaire or a certificate showing that the employee was examined within the last four years and found free of active tuberculosis; or
- Having the last employing school district verify that it has on file a current certificate of completion for risk assessment questionnaire or a certificate which documents the TB test results.

Special Instructions for Employees: Previous History of Positive Skin Test: Employees and volunteers who have a previous history of a positive skin test, converted from a negative to a positive skin test, or who have other physician-diagnosed medical disorders that interfere with the skin-testing procedure are to go to their personal physician for an X-ray.

- **Employees & Volunteers:** Please send a Certificate of Completion that certifies that employee is free of infectious to the Human Resources Department.

The Tuberculin Skin Test takes two (2) visits, one for the test and a second visit for the reading. The skin test must be read at least 48 hours but no longer than 72 hours after being administered. If you miss the second visit, the test must be repeated.

Pay warrants cannot be issued to anyone who does not have on file a statement from an acceptable source that he/she is free from tuberculosis risk.

TB TESTING:

You may have your TB skin test or risk assessment questionnaire done at your personal physician's office or Tracy Urgent Care.

Tracy Urgent Care: located at 2160 W. Grantline Road, Suite 230 Tracy, CA. (209) 832-8700.

TB Skin Tests are given on a walk-in basis. The cost is \$45.00.

*TB Risk Assessment Questionnaire and Certificate of Compliance **by appointment.** The cost is \$90.*

Tracy Urgent Care hours: M-F 9 am – 8 pm (closed from 1 – 2:30)

Sat & Sun – 9 am – 1 pm

PLEASE NOTE: The TB fee is the sole responsibility of the employee.

(Revised: 03/12/2015)



Adult Tuberculosis (TB) Risk Assessment Questionnaire¹

(To satisfy California Education Code Section 49406 and Health and Safety Code Sections 121525-121555)

To be administered by a licensed health care provider (physician, physician assistant, nurse practitioner, registered nurse)

Name: _____

Date of Risk Assessment: _____

Date of Birth: _____

History of positive TB test or TB disease Yes No

If yes, a symptom review and chest x-ray (if none performed in previous 6 months) should be performed at initial hire.*

If no, continue with questions below.

If there is a “Yes” response to any of the questions 1-5 below, then a tuberculin skin test (TST) or Interferon Gamma Release Assay (IGRA) should be performed. A positive test should be followed by a chest x-ray, and if normal, treatment for TB infection considered.

Risk Factors	
1. One or more signs and symptoms of TB (prolonged cough, coughing up blood, fever, night sweats, weight loss, excessive fatigue) Note: A chest x-ray and/or sputum examination may be necessary to rule out infectious TB. ²	Yes <input type="checkbox"/> No <input type="checkbox"/>
2. Close contact with someone with infectious TB disease	Yes <input type="checkbox"/> No <input type="checkbox"/>
3. Birth in high TB-prevalence country** (**Any country other than the United States, Canada, Australia, New Zealand, or a country in Western or Northern Europe.)	Yes <input type="checkbox"/> No <input type="checkbox"/>
4. Travel to high TB-prevalence country** for more than 1 month (**Any country other than the United States, Canada, Australia, New Zealand, or a country in Western or Northern Europe.)	Yes <input type="checkbox"/> No <input type="checkbox"/>
5. Current or former residence or work in a correctional facility, long-term care facility, hospital, or homeless shelter	Yes <input type="checkbox"/> No <input type="checkbox"/>

**Once a person has a documented positive test for TB infection that has been followed by an x-ray that was deemed free of infectious TB, the TB risk assessment is no longer required.*

¹ Adapted from a form developed by Minnesota Department of Health TB Prevention and Control Program and Centers for Disease Control and Prevention.

² Centers for Disease Control and Prevention (CDC). *Latent Tuberculosis Infection: A Guide for Primary Health Care Providers*. 2013.

(<http://www.cdc.gov/tb/publications/LTBI/default.htm>)



ADULT TUBERCULOSIS (TB) RISK ASSESSMENT QUESTIONNAIRE

(To satisfy California Education Code Section 49406 and Health and Safety Code Sections 121525-121555)

CERTIFICATE OF COMPLETION

To be signed by the licensed health care provider completing the risk assessment and/or examination

Name: _____

Date: _____

Date of Birth: _____

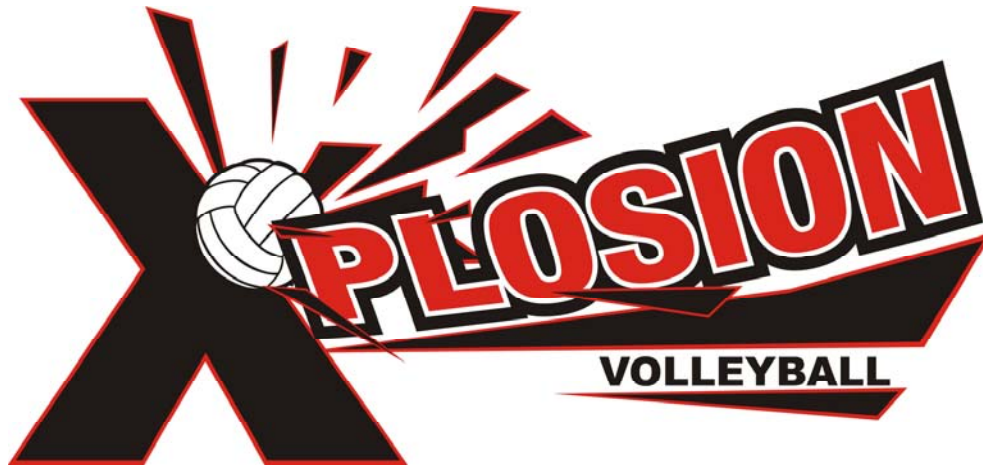
The above named patient has submitted to a tuberculosis risk assessment. The patient does not have risk factors, or if tuberculosis risk factors were identified, the patient has been examined and determined to be free of infectious tuberculosis.

Health Care Provider Signature

Please Print Health Care Provider Name Title

Office Address: Street City State Zip Code

Telephone Fax



Volleyball Clinics—For ALL 5th-8th Graders

Sunday, September 27th

Sundays, Oct. 4th, 11th, 18th, 25th & Nov. 1st

@Bella Vista Elementary School/St. Paul's Church

1635 Chester Drive, Tracy

REGISTER ONLINE! LIMITED SPACE AVAILABLE

www.XplosionVolleyball.net

Beginners Session

1:00-3:00 p.m.

Intermediate Session

3:00-5:00 p.m.

Parent Information Night! Tuesday, Oct. 20th, 7pm @ Bella Vista

What is CLUB Volleyball? Get all your questions answered about our upcoming CLUB Season.

(costs, payments, how long is the season, where do they play, tryouts, etc...)

Club Tryouts

Sunday, November 8th, 2015

Time and Location TBD (Check Website for Updates)

For more information contact:

Club Director, Omar Rodriguez @ 209-640-1442 or omar@xplosionvolleyball.net

www.XplosionVolleyball.net

Like us on Facebook and Follow us Instagram



HEALTH CARE FOR ALL FAMILIES

A PROJECT OF THE CHILDREN'S PARTNERSHIP

Enroll. Get Care. Renew. Health Coverage All Year Long

Health Coverage Options

Medi-Cal:

- ▶ Children, foster youth, pregnant women, adults, US citizens, and immigrants—including those with DACA status—may be eligible for no- or low-cost Medi-Cal.
- ▶ Medi-Cal covers immunizations, checkups, specialists, vision and dental services, and more for children and youth at no- or low-cost.
- ▶ Medi-Cal enrollment is available year-round.

Covered California:

- ▶ Covered California is where legal residents of California can compare quality health plans and choose the one that works best for them.
- ▶ Based on income and family size, many Californians may qualify for financial assistance.
- ▶ Enroll during Open Enrollment or any time you experience a life-changing event, like losing your job or having a baby. You have 60 days from the event to complete enrollment.

! Undocumented Families visit: www.allinforhealth.org/undocumented
Immigration status information is kept private, protected, and secure. It will not be used by any immigration agency to enforce immigration laws, but only to determine eligibility for health programs.

You and your family may qualify for financial help:

Household Size	If 2015 household income is less than...		If 2015 household income is between...
1	\$16,243	\$31,309	\$16,106 – \$46,680
2	\$21,984	\$42,374	\$21,709 – \$62,920
3	\$27,725	\$53,440	\$27,312 – \$79,160
4	\$33,465	\$64,505	\$32,914 – \$95,400
5	\$39,206	\$75,571	\$38,517 – \$111,640
6	\$44,947	\$86,637	\$44,120 – \$127,880
▶	Adults may be eligible for Medi-Cal	Children may be eligible for Medi-Cal	May be eligible for financial help to purchase insurance through Covered California

Income-eligible undocumented children will qualify for Medi-Cal beginning May 2016.

Enroll.

Three ways to enroll in Medi-Cal and Covered California:

- www.coveredca.com
1(800) 300-1506
- Find in-person help:
www.coveredca.com/get-help/local/

Get Care.

- ▶ Find a primary care doctor in your network.
- ▶ Schedule an annual checkup for you and your family.
- ▶ Make sure to take your child to the dentist.
- ▶ Pay your monthly premium if your plan requires it.

Renew.

- ▶ Medi-Cal must be renewed every year. Medi-Cal will mail renewal packet. Complete and return. For help, contact your local Medi-Cal office or call 211.
- ▶ Health plans through Covered California must be renewed every year. Renewal information will be mailed at the end of the year, or contact Covered California at 1 (800) 300-1506.

For more information go to:
www.allinforhealth.org

August 2015





Asegúrate, para el bienestar de tu familia

UN PROYECTO DE "THE CHILDREN'S PARTNERSHIP"

Inscríbese. Cuide Su Salud. Renueve Su Cobertura.
Cobertura de salud durante todo el año

Sus Opciones de Cobertura de Salud

Medi-Cal:

- ▶ Niños, jóvenes en hogares de crianza, mujeres embarazadas, adultos, ciudadanos de los Estados Unidos, e inmigrantes incluyendo personas con el estatus de Acción Diferida (DACA)—podrían ser elegibles para Medi-Cal gratis o a bajo costo.
- ▶ Medi-Cal proporciona vacunas, visitas al doctor de prevención, especialista, oculista y servicios dentales para niños y jóvenes gratis o a bajo costo.
- ▶ Inscripción al programa de Medi-Cal está disponible todo el año.

Covered California:

- ▶ Covered California es donde los residentes legales de California pueden comparar planes de salud de alta calidad y elegir el que les conviene.
- ▶ Dependiendo de los ingresos y el tamaño de la familia, muchos Californianos también podrían calificarán para obtener ayuda financiera.
- ▶ Inscríbese durante la Inscripción Abierta o en cualquier momento durante el año que a tenido un evento calificado de vida, como si perdió su trabajo o tuvo un bebé. Tienen 60 días del evento para inscribirse.

! **Para familias indocumentadas** visiten: www.allinforhealth.org/undocumented
Su información de inmigración es confidencial, protegida, y segura. Su información no se usará para fines de control de inmigración. Solo se usará para determinar la elegibilidad para cobertura médica.

Usted y su familia podrían calificar para asistencia financiera:

Tamaño de la familia	Si el ingreso familiar en 2015 es menos de...		Si el ingreso familiar en 2015 es entre...
1	\$16,243	\$31,309	\$16,106 – \$46,680
2	\$21,984	\$42,374	\$21,709 – \$62,920
3	\$27,725	\$53,440	\$27,312 – \$79,160
4	\$33,465	\$64,505	\$32,914 – \$95,400
5	\$39,206	\$75,571	\$38,517 – \$111,640
6	\$44,947	\$86,637	\$44,120 – \$127,880
▶	Adultos podrían calificar para Medi-Cal	Niños podrían calificar para Medi-Cal	Podrías calificar para asistencia financiera en la compra de un seguro a través de Covered California

Niños indocumentados, dependiendo de los ingresos familiares, calificarán para Medi-Cal comenzando en mayo del 2016.

Inscríbese.

Tres maneras para inscribirse con Medi-Cal y Covered California:



www.coveredca.com/espanol/



1(800) 300-0213



Ayuda en persona:

www.coveredca.com/espanol/get-help/local/

Cuide Su Salud.

- ▶ Elija su doctor de su red medica.
- ▶ Haga sus citas anuales con su doctor para usted y su familia.
- ▶ Asegúrese de llevar a su hijo(s) al dentista.
- ▶ Si su plan lo requiere, haga su pago mensual.

Renueve Su Cobertura.

- ▶ El seguro de Medi-Cal debe ser renovado cada año. Medi-Cal le enviará por correo su paquete de renovación. Complete y regrese el paquete. Para ayuda, contacte su oficina de Medi-Cal o marque 211.
- ▶ Los planes de salud a través de Covered California se deben renovar cada año. La información para renovar se le enviara a finales de año o contacte a Covered California al 1 (800) 300-0213.

Para más información visite:

www.allinforhealth.org
www.asegurate.com

Agosto 2015

