

NEW MILFORD BOARD OF EDUCATION
New Milford Public Schools
50 East Street
New Milford, Connecticut 06776

POLICY SUB-COMMITTEE
SPECIAL MEETING NOTICE

DATE: September 8, 2022
TIME: 6:45 P.M.
PLACE: Sarah Noble Intermediate School Library Media Center

AGENDA

New Milford Public Schools Mission Statement

The mission of the New Milford Public Schools, a collaborative partnership of students, educators, family, and community, is to prepare each and every student to compete and excel in an ever-changing world, embrace challenges with vigor, respect and appreciate the worth of every human being, and contribute to society by providing effective instruction and dynamic curriculum, offering a wide range of valuable experiences, and inspiring students to pursue their dreams and aspirations.

1. Call to Order

2. Public Comment

An individual may address the Board concerning any item on the agenda for the meeting subject to the following provisions:

- A. A three-minute time limit may be allocated to each speaker with a maximum of twenty minutes being set aside per meeting. The Board may, by a majority vote, cancel or adjust these time limits.
- B. If a member of the public comments about the performance of an employee or a Board member, whether positive, negative, or neutral, and whether named or not, the Board shall not respond to such comments unless the topic is an explicit item on the agenda and the employee or the Board member has been provided with the requisite notice and due process required by law. Similarly, in accordance with federal law pertaining to student confidentiality, the Board shall not respond to or otherwise discuss any comments that might be made pertaining to students.

3. Discussion and Possible Action

A. Policy for Approval:

- 1. 3453 School Activity Funds

B. Policy for Deletion:

- 1. 3453.1 Unexpended Class Funds

C. Policies Recommended for Revision and Approval at Initial Board Presentation in accordance with Board Bylaw 9311:

- 1. 4111.1/4211.1 Equal Employment Opportunity
- 2. 4118.25/4218.25 Reporting Child Abuse and Neglect
- 3. 5113 Truancy
- 4. 5141.21 Administration of Medication

4. Items of Information

A. Regulations for Review:

- 1. 4111.1/4211.1 Procedures for Employee Complaints of Discrimination
- 2. 5141.21 Administration of Medications

5. Discussion

A. Policy for Revision:

- 1. 5132 Dress and Grooming

Handwritten signature
2022 SEP -2 A 6:15
NEW MILFORD BOARD OF EDUCATION

6. Public Comment

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7. Adjourn

**Sub-Committee Members: Olga I. Rella, Chairperson
Tammy McInerney
Leslie Sarich
Keith A. Swanhall, Jr.**

**Alternates: Brian McCauley
Eric Hansell**

FOR APPROVAL

COMMENTARY: Conn. Gen. Stat. § 10-237 authorizes boards of education to establish school activity funds for specified purposes including school lunch programs, drivers-ed courses and individual school and school organization programs. The statute requires the board of education to designate a treasurer for each fund (which may be a BOE member) and provides that the treasurer must be bonded. The statute allows for the expenditure from such funds pursuant to regulations approved by the BOE. School activity funds are subject to auditing in the same manner as town accounts although a 1955 legal opinion from the Connecticut Attorney General states that school activity funds are board of education accounts. Some districts delegate the authority to establish school activity funds to the superintendent or designee subject to applicable regulations. If the Board wishes to do so, some slight amendments will need to be made to the suggested revisions in the first paragraph below. The Board may wish to consult with Town auditors to see if they have any recommendations for fund protocols that should be incorporated into this policy and/or the accompanying administrative regulation.

This policy has been combined with policy 3453.1 Unexpended Class Funds.

3453(a)

Business/Non-Instructional Operations

School Activity Funds

The Board may establish and maintain in its custody school activity funds through which it may handle (1) the finances of that part of the cost of the school lunch program not provided by Town of New Milford appropriations, (2) the finances of that part of the cost of driver education courses furnished by the Board and not provided by Town of New Milford appropriations and (3) such funds of schools and school organizations as the Board from time to time determines to be desirable. Whenever the Board establishes a school activity fund it shall designate a fund treasurer who shall be properly bonded. The designated treasurer may be a Board of Education member, but no Board member designated to serve as a fund treasurer shall receive compensation for such services. The Board may receive and accept gifts and donations to be appropriated to school activity funds.

~~School Activity Funds may be established to handle school funds and the funds of school organizations that the Board determines to be desirable. Although the control of these funds shall remain in the name of the respective schools and organizations, the Superintendent's office must adopt regulations and/or procedures to control the collection of funds and the expenditures from these accounts in a fiduciary manner.~~

Administrative regulations regarding the administration of school activity funds shall be developed by the Superintendent. All activity within these funds should be directed towards promoting the general welfare, education and morale of the student body and financing the normal legitimate extra-curricular activities of various student organizations. Each activity fund or organization should have a clear statement of purpose on file. This statement of purpose should address both the raising and spending of funds. Insofar as possible, funds should be used to benefit those students who contributed to the accumulation of the funds or for those activities for which funds were collected or accumulated.

Business/Non-Instructional Operations

School Activity Funds

The management of activity funds shall be in accordance with sound business practices **and consistent with any recommendations of Town auditors**. Each ~~building Principal, as trustee for and designated~~ treasurer of a **school** activity fund, shall be directly responsible for the operation of the fund/account in accordance with established procedures and shall be bonded. The ~~building Principal~~ **designated treasurer**, with the assistance of the Business Office, shall be responsible for the adequate maintenance of records and timely issue of reports for the same.

The following general guidelines are to be implemented via specific administrative **regulations and** procedures:

1. All bank accounts are to be listed with the District's Business Office.
2. Only transactions dealing with student related activities or for those activities expressly permitted by the Board through the Superintendent or his/her designee may flow through these accounts.
3. All accounts must require at least two (2) signatures for expenditures or withdrawals.
4. These accounts must be included as part of the annual municipal audit.
5. An annual report for all accounts must be submitted to the Board.
6. All money collected shall be placed in a locked and secure location for safe keeping prior to making a bank deposit and such deposit shall be made in accordance with Board of Education policy #3450.

Unexpended Class Funds

All invoices or obligations incurred by the Senior Class must be paid out of the senior class fund no later than the opening day of the following school year. No new obligations may be incurred any later than one week after graduation.

Remaining funds will be turned over to two class officers, in trust for the class, for the purpose of supporting the five year or a later reunion, unless the majority of the class resolves that the funds will be used for some other purpose which benefits those students who contributed to the accumulation of the funds.

(cf. 1324 – Fund Raising In and For The Schools)

(cf. 3450 – Monies in School Buildings)

(cf. 3451 – Petty Cash Funds)

Business/Non-Instructional Operations

School Activity Funds

Legal Reference: Connecticut General Statutes

7-392 Making of audits and filing of statements

10-237 Student Activity Funds

Policy adopted: March 12, 2002
Policy revised: June 10, 2008
Policy reviewed: February 25, 2014

NEW MILFORD PUBLIC SCHOOLS
New Milford, Connecticut

FOR DELETION

COMMENTARY: This policy is not legally mandated. Since the senior class fund is presumably a school activity fund it may make sense to incorporate the provisions of this policy into the school activity fund policy or regulation.

The language in this policy has been added to policy 3453 School Activity Funds.

3453.1

~~Business/Non-Instructional Operations~~

~~Unexpended Class Funds~~

~~All invoices or obligations incurred by the Senior Class must be paid out of the senior class fund no later than the opening day of the following school year. No new obligations may be incurred any later than one week after graduation.~~

~~Remaining funds will be turned over to two class officers, in trust for the class, for the purpose of supporting the five year or a later reunion, unless the majority of the class resolves that the funds will be used for some other purpose which benefits those students who contributed to the accumulation of the funds.~~

Policy adopted: June 11, 2002
Policy revised: June 10, 2008
Policy revised: March 8, 2011
Policy reviewed: February 25, 2014

NEW MILFORD PUBLIC SCHOOLS
New Milford, Connecticut

**RECOMMENDED FOR REVISION AND
APPROVAL AT INITIAL BOARD PRESENTATION**

Language in **RED** constitutes an addition

COMMENTARY: Effective October 1, 2022, Public Act 21-82 recognizes “victim of domestic violence” as a legally protected class under Connecticut law. The Act designates appropriate accommodations that may be afforded to employees who are the victims of domestic violence however those accommodations do not need to be listed out in this policy. The Act further provides that information and records regarding an employee’s status as a victim of domestic violence be kept confidential to the extent permitted by law.

The Act also immediately requires all employers with three or more employees to post “in a prominent and accessible location information concerning domestic violence and the resources available to victims of domestic violence in Connecticut.” This provision does not need to be reflected in this policy, but the District must comply with it. The legislation requires the Connecticut Commission on Human Rights and Opportunities (“CHRO”) to develop resources to assist with this obligation.

4111.1(a)

4211.1(a)

Personnel – Certified/Non-Certified

Equal Employment Opportunity

The New Milford Board of Education provides equal employment opportunities for all employees and applicants for employment. All employment decisions are made without regard to race, color, sex (including pregnancy), religion, national origin, sexual orientation, gender identity or expression, disability, marital status, age, ancestry, genetic information, veteran status, **status as a victim of domestic violence** or any other basis prohibited by local, state and federal laws. Employment decisions include, but are not limited to, recruitment, hiring, promotion, transfer, compensation, benefits, training, layoff and termination.

“Race” is inclusive of ethnic traits historically associated with race, including, but not limited to, hair texture and protective hairstyles. “Protective hairstyles” includes, but is not limited to, wigs, hairwraps and hairstyles such as individual braids, cornrows, locs, twists, Bantu knots and afro puffs.”

The school district hires people based on their qualifications for the position being filled by virtue of job related standards of suitability. Unless provided otherwise by contract, the school district’s promotional decisions are based upon an employee’s performance and qualifications as they relate to the new responsibilities.

Personnel – Certified/Non-Certified

Equal Employment Opportunity

Reasonable accommodations shall be available to disabled employees and the victims of domestic violence in a manner consistent with state and federal law. Pre-employment inquiries shall be made only regarding an applicant's ability to perform job-related functions. Medical records and records relating to an employee's status as a victim of domestic violence shall be kept separate from other employee information and shall be treated confidentially in accordance

with applicable state and federal law. Employee medical information and information regarding an employee's status as a victim of domestic violence shall be kept confidential to the extent permitted by state and federal law.

Any employee or applicant who feels there has been a violation of this policy should bring the matter to the immediate attention of the Building Principal or the Title IX Coordinator, unless the Title IX Coordinator is the subject of the complaint, in which case it should be brought to the Superintendent. Any staff member or administrator who receives a complaint should bring the matter to the immediate attention of the Title IX Coordinator, unless he or she feels the Title IX Coordinator is the inappropriate person to handle the matter under the particular circumstances, in which case, it should be brought to the attention of the Superintendent of Schools.

The Title IX Coordinator, the Director of Human Resources, may be reached at 50 East Street, New Milford, CT 06776, 860-210-2200.

The Superintendent of Schools is authorized to develop administrative regulations to establish a complaint procedure for reporting violations of this policy. The Title IX Coordinator shall have responsibility for coordinating compliance with this policy and investigating or supervising the investigation of complaints.

A copy of this policy shall be distributed to all present and future employees.

Legal Reference:

Connecticut General Statutes

10-153 Discrimination Based on Marital Status

46a-60(a) Connecticut Fair Employment Practices Act

46a-81c Sexual Orientation Discrimination- Employment

R.S.C.A. 46a-54-200 through 46a-54-207

Public Act 21-2 – An Act Creating a Respectful and Open World for Natural Hair

4111.1(c)
4211.1(c)

Personnel – Certified/Non-Certified

Equal Employment Opportunity

United States Code

- 20 U.S.C. 1681 Title IX of the Education Amendments of 1972
- 29 U.S.C. 623 Age Discrimination in Employment Act
- 29 U.S.C. 794 Section 504 of the Rehabilitation Act of 1973
- 38 U.S.C. 4301 Uniformed Services Employment and Re-employment Rights Act
- 42 U.S.C. 2000ff Genetic Information Nondiscrimination Act of 2008
- 42 U.S.C. 2000d and 2000e Titles VI and VII of the Civil Rights Act of 1964
- 42 U.S.C. 12101 Americans with Disabilities Act
- 29 C.F.R. 1604.11 EEOC Guidelines on Sexual Harassment

Policy adopted: December 9, 2003
Policy revised: November 7, 2005
Policy revised: November 10, 2009
Policy revised: June 14, 2011
Policy revised: October 11, 2011
Policy reviewed: February 24, 2015
Policy revised: August 17, 2021

NEW MILFORD PUBLIC SCHOOLS
New Milford, Connecticut

**RECOMMENDED FOR REVISION AND
APPROVAL AT INITIAL BOARD PRESENTATION**

Language in **RED** constitutes an addition

COMMENTARY: Public Act 22-87 amends the law by providing that boards of education must electronically distribute abuse and neglect reporting policies to district employees. Prior to this change, such policies needed to be distributed on an annual basis, but the law was silent as to how that distribution needed to occur (i.e. by mail, electronically, etc.).

Public Act 22-87 also now requires boards of education to electronically distribute on an annual basis the Governor’s Task Force on Justice for Abused Children’s guidelines regarding identifying and reporting child sexual abuse to all school employees, as well as members of the Board and parents and guardians of students in enrolled in District schools. 2021 legislation required the Governor’s Task Force for Abused Children to develop such guidelines by December 1, 2021. To date, the only guidelines the Governor’s Task Force on Justice for Abused Children have developed address abuse and neglect recognition and prevention specifically within youth sports. It is unclear at this point in time whether additional guidelines will be developed that address identifying and reporting child sexual abuse more broadly so at this point the reference at the end of the policy should be sufficient.

In addition to the above, legal recommends making several additional revisions to this policy. First, the initial section entitled “Reporting Procedure for Mandated Reporters” can be deleted and the second section with the same title can take its place. The second section was added with a reference that it would become effective on October 1, 2019 as a result of state legislation permitting oral and electronic reporting to DCF within twelve hours after a mandated reporter has acquired reasonable cause to believe a child has been abused and neglected. Since the 2019 section is now effective the old section may safely be deleted.

Second, legal recommends that the last sentence in the section entitled “Investigation by the Board of Education” be deleted. This sentence, which provides that the Superintendent shall conduct an internal investigation of alleged abuse or neglect by a school employee only after receipt of notice from DCF or law enforcement that the Board’s investigation will not conflict with an investigation by DCF or law enforcement, is too restrictive. The existing sentence is based on DCF’s model abuse and neglect policy for school districts, but it does not align closely with state statutes. Unfortunately, there are often times where a district has a pressing need to investigate so waiting on notice from DCF or law enforcement that it is permissible to investigate – which may not be provided in a timely manner – is inappropriate. The first two sentences of the paragraph are sufficient and closely align with state law. Legal recommends deleting the last sentence to avoid unnecessarily restricting District administrators in investigating potential abuse and neglect issues.

4118.25(a)

4218.25(a)

Personnel - Certified/Non-Certified

Reporting Child Abuse and Neglect

Personnel - Certified/Non-Certified

Reporting Child Abuse and Neglect

The Board of Education recognizes the obligation and importance of reporting suspected child abuse and neglect. Many of the school district's employees are considered mandated reporters and have an independent duty under state law to report suspected abuse and neglect to the Department of Children and Families ("DCF") or other law enforcement agencies. Regardless of an employee's status as a mandated reporter, ALL employees of the school district are required to report suspected child abuse or neglect in accordance with this policy and applicable law.

Definitions

For the purposes of this policy, the following definitions shall apply:

"Child" means any person under eighteen years of age or any person under twenty-one years of age who is in full-time attendance in a secondary school, a technical school, a college or a state-accredited job training program;

"Abused" refers to a child who (a) has had physical injury or injuries inflicted upon him/her other than by accidental means, or (b) has injuries which are at variance with the history given of them, or (c) is in a condition which is the result of maltreatment such as, but not limited to, malnutrition, sexual molestation or exploitation, deprivation of necessities, emotional maltreatment or cruel punishment;

"Neglected" refers to a child who (a) has been abandoned; (b) is being denied proper care and attention, physically, educationally, emotionally, or morally; or (c) is being permitted to live under conditions, circumstances, or associations injurious to the child's well-being;

"Mandated reporters" are "School Employees" and specifically include: teachers, substitute teachers, administrators, superintendents, guidance counselors, psychologists, social workers, nurses, physicians, paraprofessionals, coaches or any other person who, in the performance of his or her duties, has regular contact with students and who provides services to or on behalf of students enrolled in the district.

"Sexual assault" means the criminal conduct described in Conn. Gen. Stat. §§53a-70 (sexual intercourse by force or threat of force, or with a person unable to consent due to age or mental incapacity); 53a-70a (aggravated sexual assault); 53a-71 (includes sexual intercourse between a school employee and a student enrolled in the school district); 53a-72a (compelled sexual contact); 53a-72b (sexual contact with threat of firearm) or 53a-73a (sexual contact between a school employee and student enrolled in the school district).

Personnel - Certified/Non-Certified

Reporting Child Abuse and Neglect

When to Report Abuse or Neglect

Reports must be made whenever an employee, in the ordinary course of his or her employment, has reasonable cause to suspect or believe that:

1. A child (as defined above) has been: abused or neglected; has had non-accidental physical injury, or injury which is at variance with the history given of such injury, inflicted upon such child; or has been placed in imminent risk of serious harm.
2. A student has been the victim of a sexual assault and the perpetrator is a school employee. "Student" means a person of any age who is being educated by a local or regional board of education or technical high school other than as part of an adult education program.
3. A full time student under the age of 21 has been abused or neglected by a member of the school staff.

Reasonable Cause

A reporter's suspicion or belief may be based on factors including, but not limited to, observations, allegations, facts or statements by a child, victim or third party. Such suspicion or belief does not require certainty or probable cause.

Reporting Procedure for Mandated Reporters[†]

Oral Report to DCF within 12 hours

~~Mandated reporters must make an oral report by telephone (24 Hour Careline, 1-800-842-2288) or in person to the Department of Children and Families, or an appropriate law enforcement agency, as soon as practicable but not later than twelve (12) hours after having acquired reasonable cause to suspect or believe that a child or victim has been abused or neglected. The employee shall notify the Building Principal and Superintendent of Schools or designee immediately after the oral report has been made.~~

[†]The following section of this policy shall be effective until September 30, 2019.

Personnel - Certified/Non-Certified

Reporting Child Abuse and Neglect

~~Written Report to DCF within 48 hours~~

~~Mandated reporters shall submit a written report to DCF within forty eight (48) hours of making the oral report. The report shall be filed on form DCF-136 or other sufficient form provided by DCF. The reporter shall also provide a copy of the written report to the Building Principal and~~

~~Superintendent of Schools, except when the Superintendent is the alleged perpetrator of the abuse or neglect. In making all written reports required under this policy, the reporter may use a form provided by DCF. Written reports of abuse or neglect by mandatory reporters shall include the following information, if known:~~

- ~~1. The names and addresses of the child or victim and his or her parents or other person responsible for the child's or victim's care;~~
- ~~2. The age of the child or victim;~~
- ~~3. The gender of the child or victim;~~
- ~~4. The nature and extent of the child's or victim's injury or injuries, maltreatment or neglect;~~
- ~~5. The approximate date and time the injury or injuries, maltreatment or neglect occurred;~~
- ~~6. Information concerning any previous injuries to, maltreatment of or neglect to the child or his or her siblings;~~
- ~~7. The circumstances in which the injuries, maltreatment or neglect came to be known to the reporter;~~
- ~~8. The name of the person or persons suspected to be responsible for causing such injury or injuries, maltreatment or neglect;~~
- ~~9. The reasons such persons are suspected of causing such injury or injuries, maltreatment or neglect;~~
- ~~10. Any information concerning any prior cases in which such person or persons have been suspected of causing an injury, maltreatment or neglect of a child;~~
- ~~11. Whatever action, if any, was taken to treat, provide shelter or otherwise assist the child.~~

Personnel - Certified/Non-Certified

Reporting Child Abuse and Neglect

Reporting Procedure for Mandated Reporters²

Oral Report to DCF within 12 hours

Mandated reporters must make an oral or electronic report to the Department of Children and Families, or an appropriate law enforcement agency, as soon as practicable but not later than twelve (12) hours after having acquired reasonable cause to suspect or believe that a child or victim has been abused or neglected. An oral report shall be made by telephone (24 Hour Careline, 1-800 842-2288) or in person. An electronic report shall be made in accordance with any electronic reporting procedures established by the Commissioner of the Department of Children and Families. The employee shall notify the Building Principal and Superintendent of Schools or designee immediately after the oral or electronic report has been made. A mandated reporter who makes an electronic report shall respond to further inquiries from the Department of Children and Families made within twenty-four hours of such report.

Written or Electronic Report to DCF within 48 hours

Mandated reporters shall submit a written or electronic report to DCF within forty-eight (48) hours of making an oral report. The reporter shall also provide a copy of the written or electronic report to the Building Principal and Superintendent of Schools, except when the Superintendent is the alleged perpetrator of the abuse or neglect. All reports required under this policy, shall be made in a manner prescribed by the Department of Children and Families.

All reports of abuse or neglect by mandatory reporters shall include the following information, if known:

1. The names and addresses of the child or victim and his or her parents or other person responsible for the child's or victim's care;
2. The age of the child or victim;
3. The gender of the child or victim;
4. The nature and extent of the child's or victim's injury or injuries, maltreatment or neglect;
5. The approximate date and time the injury or injuries, maltreatment or neglect occurred;
6. Information concerning any previous injuries to, maltreatment of or neglect to the child or his or her siblings;

²~~The following section of this policy shall be effective on and after October 1, 2019.~~

Personnel - Certified/Non-Certified

Reporting Child Abuse and Neglect

7. The circumstances in which the injuries, maltreatment or neglect came to be known to the reporter;
8. The name of the person or persons suspected to be responsible for causing such injury or injuries, maltreatment or neglect;
9. The reasons such persons are suspected of causing such injury or injuries, maltreatment or neglect;
10. Any information concerning any prior cases in which such person or persons have been suspected of causing an injury, maltreatment or neglect of a child;
11. Whatever action, if any, was taken to treat, provide shelter or otherwise assist the child.

Cooperation with Investigation

A person reporting child abuse or neglect shall provide any person authorized to conduct an investigation of child abuse or neglect with all information related to the investigation that is in the possession or control of the person reporting the abuse or neglect, except as expressly prohibited by state or federal law.

Notwithstanding the provisions of Connecticut General Statutes §10-151c, upon request and for the purposes of an investigation of suspected child abuse or neglect by a teacher employed by the Board, the Board shall provide the Commissioner of DCF any records maintained or kept on file about said teacher. Such records shall include, but not be limited to, supervisory records, reports of competence, personal character and efficiency maintained in such teacher's personnel file with reference to evaluation of performance as a professional employee of the Board and records of personal misconduct. For the purpose of this requirement, "teacher" is defined as each certified professional employee below the rank of superintendent in a position requiring a certificate issued by the State Board of Education.

Reporting Procedure for Employees who are NOT Mandated Reporters

Employees of the school district who are not mandated reporters are required to report suspected abuse or neglect and suspected sexual assault of a student by a school employee as soon as possible but not later than twelve (12) hours after the employee has reasonable cause to suspect that a child has been abused or neglected. Such reports shall be made in writing to the Superintendent of Schools and the building administrator who shall act in accordance with his or her obligations as a mandated reporter.

4118.25(g)
4218.25(g)

Personnel - Certified/Non-Certified

Reporting Child Abuse and Neglect

Nothing in the reporting procedure outlined by this policy prevents employees who are not mandated reporters from also reporting suspected abuse or neglect directly to DCF or a law enforcement agency.

Procedures When a School Employee is the Alleged Abuser

Notification of Parent or Guardian

Whenever there is a report that a student has been abused or neglected by a school employee, the Superintendent shall immediately notify the child's parent or other person responsible for the child's care that a report has been made.

Investigation by the Board of Education

The Board of Education shall permit and give priority to any investigation conducted by DCF or the appropriate law enforcement agency. The Board may conduct its own investigation of the alleged abuse or neglect or sexual assault by a school employee provided that such investigation does not impede an investigation by DCF. ~~The Superintendent of Schools shall conduct his/her investigation upon receipt of notice from the Commissioner of DCF or the appropriate law enforcement agency that the Board's investigation will not interfere with the investigation of DCF or law enforcement.~~

Before interviewing a child in connection with the investigation of an allegation of abuse or neglect by a school employee, the Superintendent or designee shall endeavor to obtain, when possible, the consent of parents or guardians or other persons responsible for the care of the child, to interview the child. The investigation shall include an opportunity for the suspected perpetrator to be heard with regard to the alleged abuse or neglect. During the course of the investigation, the Superintendent of Schools may suspend the employee with pay or may place the employee on administrative leave with pay pending the outcome of the investigation.

Regardless of the outcome of any investigation by DCF or a law enforcement agency, the Superintendent of Schools may take disciplinary action against any school employee up to and including termination of employment based upon the school district's investigation.

4118.25(h)
4218.25(h)

Personnel - Certified/Non-Certified

Reporting Child Abuse and Neglect

Impact of DCF Findings on Mandatory Suspension of School Employees

If the Commissioner of DCF determines that there is reasonable cause to believe that a child has been abused or neglected by a school employee, and has recommended that such employee be placed on the DCF child abuse and neglect registry, the Superintendent shall suspend such employee with pay and without termination of benefits, and, within seventy-two (72) hours after issuance of the suspension, shall notify the Board of Education and the Commissioner of Education or his representative of the reasons for and conditions of the suspension. The suspension of a school employee who is employed in a position requiring a certificate shall remain in effect until the Board of Education acts pursuant to §10-151 of the Connecticut General Statutes. The Superintendent shall also disclose those records provided by DCF concerning its investigation to the Commissioner of Education and the Board of Education or its attorney. If the contract of employment of such a certified school employee is terminated as the result of an investigation of abuse or neglect or the employee resigns, the Superintendent shall notify the Commissioner of Education or his representative within seventy-two (72) hours after such termination or resignation. The suspension of a non-certified school employee shall remain in effect until the Superintendent of Schools or designee determines the appropriate disciplinary response, up to and including termination of employment.

Prohibitions on Employment

The Board shall NOT employ a person whose employment contract was previously terminated by a board or who resigned from such employment if such person:

Has been convicted of a crime involving an act of child abuse or neglect as described in Conn. Gen. Stat. § 46b-120 or sexual assault against a student being educated by a local or regional board of education or technical high school other than as part of an adult education program as described in Conn. Gen. Stat. §§53a-70, 53a-70a, 53a-71, 53a-72a, 53a-72b or 53a-73a; or has been convicted of the crime of failing to make a mandated report in a timely manner or intentionally and unreasonably interfering with or preventing the making of a mandated report in violation of Conn. Gen. Stat. §17a-101a regardless of whether the allegation of abuse or neglect or sexual assault has been substantiated.

Personnel - Certified/Non-Certified

Reporting Child Abuse and Neglect

Training

School employees who are mandated reporters and were hired on or after July 1, 2011 shall be required to complete a training program for the accurate and prompt identification and reporting of child abuse and neglect. School employees who are mandated reporters and were hired before July 1, 2011 are required to complete a refresher training program. All mandated reporters shall be required to complete the refresher training program at least once every three years.

Although only mandated reporters are legally required to complete abuse and neglect training and refresher training programs, the Superintendent of Schools, at his or her discretion, may require other school employees to complete such training.

The training and refresher training programs shall be developed and made available by the Commissioner of DCF in accordance with applicable law shall annually certify to the Superintendent of Schools that each school employee who is a mandated reporter working at the school is in compliance with the training requirements. The Superintendent of Schools shall certify that all school employees who are mandated reporters are in compliance with training requirements.

Confidential Rapid Response Team

The Board hereby establishes a confidential rapid response team to coordinate with the DCF to ensure prompt reporting of suspected abuse or neglect or the suspected sexual assault of a student by a school employee and provide immediate access to information and individuals relevant to the department's investigation. The team shall consist of the Superintendent of Schools or designee, a teacher, a local police officer and other members designated by the Superintendent.

Child Sexual Abuse and Assault Awareness and Prevention

The Superintendent of Schools is authorized to implement a sexual abuse and assault awareness and prevention program developed by the State Department of Education in accordance with state law. The program should include training for teachers regarding the prevention, identification of and response to child sexual abuse and assault, information on resources to promote awareness, age-appropriate educational materials for students in grades K-12, and use of the uniform child sexual abuse and assault response policy and reporting procedure.

Personnel - Certified/Non-Certified

Reporting Child Abuse and Neglect

Records and Documentation

All records pertaining to allegations, investigations or reports of child abuse or neglect by a school employee shall be maintained in a central location. Such records shall include any reports made to DCF. The Department of Education shall have access to such records.

The Board shall keep records establishing that school employees have completed training and refresher training programs as required by law.

The Board shall document the annual notification of this policy to school employees.

Retaliation Prohibited

Retaliation against a mandated reporter is prohibited. The Board will not discriminate, discharge or otherwise retaliate against an employee who acts in good faith to comply with this policy and the individual obligations of applicable state law.

Violation of this Policy

Employees who fail to report child abuse or neglect in a timely manner or otherwise violate the requirements of this policy and/or applicable law may face disciplinary action up to and including termination of employment.

Delegation of Authority

The Superintendent is authorized to delegate his or her responsibilities for receiving and making reports, notifying and receiving notification, and conducting investigations to a designee acting on his or her behalf.

Notification of Policy and Abuse and Neglect Prevention and Reporting Resources

This policy shall be **electronically** distributed annually to all school employees.

In addition, on an annual basis the administration shall electronically distribute the Governor's Task Force on Justice for Abused Children guidelines regarding identifying and reporting child sexual abuse. Task Force resources regarding identifying and reporting child sexual abuse may be found at:

<https://portal.ct.gov/DCF/GTF-CJA/Home>

Personnel - Certified/Non-Certified

Reporting Child Abuse and Neglect

Legal References: Connecticut General Statutes

10-220 Duties of boards of education

10-220a In-service training

10-221s Investigations of child abuse and neglect. Disciplinary action

10-151e Disclosure of teacher records for purposes of an investigation of child abuse or Neglect

17a-101 Protection of children from abuse. Mandated reporters. Educational and training programs Model mandated reporting policy

17a-101a Report of abuse, neglect or injury of child or imminent risk of serious harm to child. Penalty for failure to report. Notification of Chief State's Attorney

17a-101b ~~Oral report by mandated reporter~~ **Report by mandated reporter. Notification of law enforcement agency when allegation of sexual abuse or serious physical abuse. Notification of person in charge of institution, facility or school when staff member suspected of abuse or neglect**

17a-101c Written report by mandated reporter

17a-101d Contents of oral and written reports

17a-101i Abuse or neglect by school employee or public or private institution or facility providing care for children. Suspension. Termination or resignation. Notification of state's attorney re conviction. Written policy re mandated reporting. Training programs

17a-101o School employee failure or delay in reporting child abuse or neglect

17a-101p Reports by persons not designated as mandated reporters. Notice to Commissioner of Education

17a-101q State-wide sexual abuse and assault awareness and prevention program

17a-103e Reports of child abuse and neglect by a school employee. Review of records and information

53a-65 Definitions

53a-70 Sexual assault in the first degree: Class B or A felony

53a-70a Aggravated sexual assault in the first degree: Class B or A felony

53a-71 Sexual assault in the second degree: Class C or B felony

53a-72a Sexual assault in the third degree. Class D or C felony

53a-72b Sexual assault in the third degree with a firearm: Class C or B felony

53a-73a Sexual assault in the fourth degree: Class A misdemeanor or class D felony

~~Public Act 18-67 An Act Concerning Minor Revisions to the Statutes of the Department of Children and Families and Establishing a Pilot Program to Permit Electronic Reporting by Mandated Reporters~~

4118.25(I)
4218.25(I)

Personnel - Certified/Non-Certified

Reporting Child Abuse and Neglect

Policy adopted: March 13, 2012
Policy revised: October 9, 2012
Policy revised: October 14, 2014
Policy revised: October 13, 2015
Policy revised: September 18, 2018

NEW MILFORD PUBLIC SCHOOLS
New Milford, Connecticut

**RECOMMENDED FOR REVISION AND
APPROVAL AT INITIAL BOARD PRESENTATION**

Language in **RED** constitutes an addition

COMMENTARY: Public Act 22-47 amends Connecticut's truancy statute by requiring school personnel to provide notice of the availability of the 2-1-1 Infoline program, and other pediatric mental and behavioral health screening services and tools to the parents/guardians of students who are deemed truant.

5113(a)

Students

Truancy

Attendance

Classroom learning experiences are the basis for public school education. Time lost from class is lost instructional opportunity. The attendance policy is intended to promote student success.

The New Milford Board of Education requires parents to ensure that their children attend school regularly during the hours and term's the public schools are in session.

Regular attendance at school is not only required by state law, but is an integral component in student success and a matter of self-discipline which will prove important later in life. Class time is an invaluable opportunity for students and teachers to interact with each other and exchange ideas. It is also the forum for a wide range of learning opportunities which cannot be duplicated outside of the classroom. Therefore, in order to avail themselves of the maximum opportunity for learning, students need to be present in each and every class.

The success of a student is determined by the cooperative effort of the student, parents, school, and the community. Failure of these groups to live up to their responsibilities can result in failure for the student. For this reason, responsibilities must be clearly defined and followed.

The procedures and regulations shall be in accordance with Board policy and Connecticut State law. The Superintendent shall insure that administrative procedures and disciplinary actions for student attendance will be contained in each student/parent handbook.

Procedures and regulations shall be maintained and implemented for the schools to provide age-appropriate measures which promote regular and punctual attendance. Schools that share the same grade levels shall have the same procedures and regulations. The procedures and regulations shall clearly define the responsibilities of parents and students regarding attendance in class and school, tardiness, early dismissal, completion of missed work, and other areas which affect the classroom learning experience.

The Principal will give annual written notice to parents/guardian of their obligations according to Connecticut General Statute 10-184. At the beginning of each academic year -- or, in the case of students who enroll during the school year, at the time of enrollment -- the school district will require from the parents/guardians a telephone number where they can be contacted during the school day (i.e. from first bell to dismissal).

Students

Truancy

The official school day, during which all students are the responsibility of the high school, begins when the student either boards a school bus to come to school or otherwise when the student arrives on campus for the day. Students may neither get off the bus prior to arrival at school nor may they leave campus once they have arrived, without prior approval of the Principal or the Principal's designee.

A. Student Responsibilities

1. To attend all classes except for reasons stated under "Excused Absence" and to be punctual.
2. To report directly to the Attendance Office or School Office when tardy to school, in accordance with school procedures.
3. To notify teachers of anticipated absence and to make arrangements to make up work promptly upon return from an excused absence. In the case of an extended absence, to seek faculty assistance if needed and to make up work in a reasonable time frame.
4. To communicate with parents, teachers, and/or school administrators any problems related to lack of attendance and/or tardiness to school or any class.
5. To report one's own absences from school or class in accordance with school procedures if one is legally emancipated.

B. Parent Responsibilities:

1. To communicate and work cooperatively with the school for the benefit of the student.
2. To emphasize the importance of regular attendance and punctuality. To authorize only those absences that are included under "Excused Absence." Also, to make every effort to schedule appointments and vacations outside of school hours.
3. To contact the school regarding an absence or tardy the morning of that absence or tardy.
4. To assist students with arrangements to seek faculty assistance and make up missed work resulting from an absence.

Students

Truancy

C. School Responsibilities:

1. To take all actions necessary to ensure the success of the student, including parent conferences, counseling, and interaction with the community in making use of community services.
2. To keep accurate attendance records.
3. To notify parents promptly (when parents have not called the school) of all absences whether, for one class or the entire school day.
4. To arrange opportunities for the students to make up missed tests, quizzes and assignments resulting from absences, upon their return to school. In the case of extended absence, to prepare with the student a plan for faculty assistance and an opportunity to make up work in a reasonable time frame.

D. Community Responsibilities:

1. To realize that the success of students contributes to the success of the community.
2. To encourage regular school attendance as a prerequisite for student employment.
3. To encourage area businesses to refrain from allowing students to congregate during school hours.
4. To encourage medical and dental offices to arrange student appointments outside of school hours.
5. To do all that is possible under current state law to ensure that all students attend school regularly.

Definitions

1. Truant - Shall mean a student age 5-18 inclusive who has four unexcused absences in any one month or ten unexcused absences in one school year.
2. Tardy - A student shall be considered tardy if he/she arrives at class after classes have begun.
3. Absence - any non-attendance of an enrolled student. A student is considered to be in attendance if present at his/her assigned school, or an activity sponsored by the school (e.g. field trip), for at least half of the regular school day.

Students

Truancy

4. Disciplinary Absence - an absence that is the result of school or district disciplinary action such as an out-of-school suspension or expulsion. Disciplinary absences are neither excused nor unexcused.
5. Documentation of absence — a written explanation of the nature of and the reason for the absence as well as the length of the absence. This includes a signed note from the student's parent/guardian, a signed note from a school official that spoke in person with the parent/guardian regarding the absence, or a note confirming the absence by the school nurse or by a licensed medical professional, as appropriate. Separate documentation must be submitted for each incidence of absenteeism. Non-English speaking parents/guardians may submit documentation in their native language.
6. Excused Absence - A student's non-attendance from school shall be considered excused if written documentation of the reason for the absence has been submitted within ten school days of the student's return to school or in accordance with Section 10-210 of the Connecticut General Statutes (when the school medical advisor provides notice to a parent or guardian that a student has symptoms of a communicable disease) and meets the following criteria:
 - A. For absences one through nine, a student's absences from school are considered excused when the student's parent/guardian approves such absence and submits appropriate documentation; and
 - B. For the tenth absence and all absences thereafter, a student's absences from school are considered excused for the following reasons:
 1. student illness (all student illness absences must be verified by an appropriately licensed medical professional to be deemed excused, regardless of the length of absence);
 2. up to two (2) “mental health wellness days,” during which a student attends to such student’s emotional and psychological well-being in lieu of attending school, which days may not be taken consecutively;
 3. student's observance of a religious holiday;
 4. death in the student's family or other emergency beyond the control of the student's family;

Students

Truancy

5. mandated court appearances (additional documentation required); the lack of transportation that is normally provided by a district other than the one the student attends (no parental documentation is required for this reason); or
 6. extraordinary educational opportunities pre-approved by district administrators and in accordance with Connecticut State Department of Education guidance.
- C. Up to ten absences will be considered excused for students to visit with parents or legal guardians who are active members of the armed forces and have been called to duty for, are on leave from or have immediately returned from deployment to a combat zone or combat support posting. The Board of Education may grant additional excused absences for such purposes.
7. Unexcused absence — Any absence that does not meet the criteria for an excused absence (including proper documentation) or a disciplinary absence.
 8. Dismissal - No school, grade, or class may be dismissed before the regularly scheduled dismissal time without the approval of the Superintendent or his/her designee. No teacher may permit any individual student to leave school prior to the regular hour of dismissal without the permission of the Principal. No student may be permitted to leave school at any time other than at regular dismissal without the approval of the student's parent/guardian. If a court official with legal permission to take custody of a child, or if a police officer arrests a student, the parent/guardian should be notified of these situations by the administration.
 9. Chronically Absent Child - a child who is enrolled in a school under the jurisdiction of the Board and whose total number of absences at any time during a school year is equal to or greater than ten per cent of the total number of days that such student has been enrolled at such school during such school year.

Attendance

Connecticut state law requires parents to cause their children, ages five through eighteen inclusive, to attend school regularly during the hours and terms the public school is in session. Parents or persons having control of a child five years of age have the option of not sending the child to school until age six or seven. The parent or person having control of a child of age five or six shall exercise such option by personally appearing at the school district office and signing an option form. At such time, school personnel shall provide the parent or person with information on the educational opportunities available in the school system.

Students

Truancy

Mandatory attendance terminates upon graduation or withdrawal with written parent/guardian consent at age seventeen.

Classroom learning experiences are the basis for public school education. Time lost from class is lost instructional opportunity. The Board of Education requires that accurate records be kept of the attendance of each child, and students should not be absent from school without parental knowledge and consent. Parents and guardians shall be notified when a student has reached nine (9) absences and reminded of the stricter rules that apply to further absences for the remainder of the school year.

The Superintendent of Schools or designee shall periodically audit a small percentage of the documentation provided for student absences in order to ensure general compliance with this policy.

Excessive Absences/Truancy

It is the policy of the Board of Education to monitor school attendance so as to identify students who are truant, and to enlist the cooperation of parents and, when necessary, the juvenile justice system, in order to address the problem when it arises. The following truancy procedures are hereby adopted:

For purpose of these procedures, "Parent" means the parent, guardian or other person having control of a child.

1. Whenever a student in grade K-8 is absent from school on a regularly scheduled school day and no indication has been received by school personnel that the parent, guardian or other person having control of the child is aware of the student's absence, school personnel or volunteers under the direction of the building principal shall make a reasonable effort to notify the parent of the student's absence by telephone.
2. When a student is identified as a truant, the Superintendent or his/her designee will conduct a meeting with the parent, guardian or other person having control of the student, the student, if appropriate, and with such school personnel where involvement is determined appropriate. The meeting will occur not later than ten (10) school days after the child's fourth (4th) unexcused absence in a month or the tenth (10th) unexcused absences in a school year and will be for the purpose of reviewing and evaluating the reasons for truancy. In reviewing and evaluating the reasons for the student's truancy, the participants of the meeting should consider the appropriateness of referring the student to the school's [Student Assistance Team] or planning and placement team. At the meeting, school personnel shall be designated to coordinate services with and referrals of children to community agencies

Students

Truancy

providing child and family services if appropriate. **Additionally, school personnel shall provide notice to the parent or guardian of the student identified as truant of the availability of the 2-1-1 Infoline program, and other pediatric mental and behavioral health screening services and tools.**

Chronic Absenteeism

The Board will report data to the state regarding the number of students who are truant and chronically absent as required by law. In the event that a school experiences high rates of chronic absenteeism, the Superintendent will form an attendance review team to address the problem. Such attendance review teams may utilize resources developed by the State Department of Education for chronic absenteeism prevention and intervention.

Legal References:

Connecticut General Statutes

10-184 Duties of parents

10-185 Penalty

10-198a through 10-202 Attendance, truancy - in general

10-220 Duties of boards of Education

10-221 Boards of education to prescribe rules, policies and procedures

46b-149 Child from family with service needs

~~Public Act 21-46 An Act Concerning Social Equity and the Health, Safety and Education of Children~~

Connecticut State Board of Education Definitions of Excused and Unexcused Absences Adopted June 27, 2012

Connecticut State Board of Education Statewide Definition of Attendance for Public School Districts in Connecticut, Adopted January 2, 2008.

Connecticut State Department of Education's "Guidelines for Implementation of the Definitions of Excused and Unexcused Absences and Best Practices for Absence Prevention and Intervention," April 2013

Students

Truancy

Policy adopted: June 12, 2001
Policy revised: June 24, 2004
Policy revised: June 12, 2007
Policy revised: June 8, 2010
Policy revised: October 11, 2011
Policy revised: October 9, 2012
Policy revised: October 8, 2013
Policy revised: October 14, 2014
Policy revised: October 13, 2015
Policy revised: September 19, 2017
Policy revised: August 17, 2021

NEW MILFORD PUBLIC SCHOOLS
New Milford, Connecticut

Appendix A

NEW MILFORD PUBLIC SCHOOLS
New Milford, ConnecticutANNUAL NOTIFICATION OF PARENTAL OBLIGATIONS
UNDER C.G.S. 10-184

Dear (Parent Name),

Connecticut law requires that annually the school district provide you a written notice of your obligations under Connecticut General Statute 10-184. This law requires each parent or guardian of a child five years of age and older and under eighteen years of age to ensure that the child attends school regularly when school is in session unless such parent or other person shows that the child is receiving equivalent instruction elsewhere, or that the child has graduated from high school. Parents or persons having control of a child five or six years of age have the option of not sending the child to school until age six or seven by personally appearing at the school district office and signing an option form. The parent or person having control of a child seventeen years of age may consent to such child's withdrawal from school by signing a withdrawal form at the school district office.

Regular student attendance is essential to the educational process. So that we can inform you if your child is absent without a previous explanation, Connecticut laws also require that we obtain from you a telephone number or other means of contacting you during the school day. Please complete and return the form attached.

Thanks for your cooperation.

Sincerely,

Principal

**RECOMMENDED FOR REVISION AND
APPROVAL AT INITIAL BOARD PRESENTATION**

Language in **RED** constitutes an addition

COMMENTARY: Public Act 22—80 amends school medication administration laws to allow school nurses – or during their absence/unavailability – qualified/trained school employees to administer “opioid antagonists” (i.e. Narcan) to students experiencing a drug overdose who do not have prior written authorization from a parent or a prior order from a qualified medical professional.

The recommended change below aligns with recommended changes to administrative regulations on this topic. Public Act 22-80 requires the State Department of Education and Department of Consumer Protection to jointly develop guidelines on the storage and administration of opioid antagonists in schools by October 1, 2022 so further changes may be needed once the guidelines are published.

The change to the section on the administration of epinephrine by school bus drivers is recommended since the applicable public act is now codified into the school medication administration statutes.

5141.21(a)

Students

Administration of Medication

A licensed nurse, or in the absence of such nurse, qualified personnel for schools may administer medication to students in the school system. Administration of medications by qualified personnel for schools shall be under the general supervision of the school nurse and in accordance with a student's individual medication plan.

Students will be permitted to self-administer medications only when they follow the procedures established by this policy and obtain prior approval from the school nurse. This requirement applies even to students who are age 18 or older.

Nothing in this policy prohibits parents or guardians from administering medication to their own children on school grounds.

Definitions

For the purpose of this policy, the following definitions shall apply:

“Medication” means any medicinal preparation including over-the-counter, prescription and controlled drugs.

“Administration of Medication” means any one of the following activities:

- Handling, storing, preparing or pouring of medication;
- Conveying it to the student according to the medication order;
- Observing the student inhale, apply, swallow, or self-inject the medication;

Students

Administration of Medication

- Documenting that the medication was administered;
- Counting remaining doses to verify proper administration and use.

“Qualified personnel” (A) for schools means a qualified school employee who is (i) a full time employee, or is (ii) a coach, athletic trainer or school paraprofessional, or (B) for school readiness programs and before- and after-school programs, means the director or director's designee and any lead teachers and school administrators who have been trained in the administration of medication;

“Authorized Prescriber” means a physician, dentist, optometrist, advanced practice registered nurse or physician assistant and, for interscholastic and intramural athletic events only, a podiatrist.

“Self-Administration of Medication” means that the medication is controlled by the student at all times and self-managed by the student according to an individual medication plan.

Except for the emergency administration of epinephrine to students who do not have a written prior authorization or order, prior to any administration of medication to students, the school nurse must be in possession of the following documentation:

1. The written order of an authorized prescriber;
2. The written authorization of a parent, guardian or student who is 18 years of age or older; and
3. The written permission for the exchange of information between the prescriber and the school nurse necessary to ensure safe administration of the medication.

Self-Administration of Medications by Students

Students who have a verified chronic medical condition and are deemed capable to self-administer prescribed emergency medication [or maintenance medication for diabetes] will be permitted to self-administer such medication provided that:

1. The required documentation for self-administering medication at school includes the following additional items:
 - a. The written order must include the recommendation for self-administration by the authorized prescriber;
 - b. The written authorization of the parent/guardian or student who is 18 years of age or older for the self-administration of medication;

Students

Administration of Medication

- c. An assessment by the school nurse that the student is competent to self-administer in the school setting;
 - d. An appropriate plan for the self-administration of medication including provisions for general supervision developed by the school nurse.
2. In addition, the Principal and appropriate staff must be informed that the student is self-administering prescribed medication.
3. The medication is transported by the student and maintained under the student's control in accordance with school policy and the student's plan.
4. In the case of inhalers for asthma and cartridge injectors for medically diagnosed allergies, the school nurse's review of a student's competency to self-administer shall not be used to prevent a student from retaining and self-administering such medication. In such cases, students may retain possession of inhalers or cartridge injectors at all times while attending school or receiving transportation services and self-administer such medication with only the written authorization of an authorized prescriber and written authorization from a student's parent or guardian.

Students with a medically diagnosed life-threatening allergic condition may possess, self-administer or possess and self-administer medication, including, but not limited to, medication administered with a cartridge injector, to protect such student against serious harm or death. Such students may possess, self-administer or possess and self-administer medication pursuant to the written authorization of a parent or guardian and pursuant to the written order of a qualified medical professional. Such students may possess, self-administer or possess and self-administer medication while in school or while receiving school transportation services.

Self-Administration of Sunscreen by Students

Any student who is six years of age or older may possess and self-apply an over-the-counter sunscreen product while in school prior to engaging in any outdoor activity, provided a written authorization signed by the student's parent or guardian is submitted to the school nurse.

Administrative Regulations

The Superintendent of Schools, with the advice and approval of the school medical advisor and the school nurse supervisor shall develop administrative regulations to implement this policy.

Students

Administration of Medication

The regulations shall address the following topics:

1. Administration of medications by qualified personnel for schools
2. Limitations of LPNs, paraprofessionals, coaches and athletic trainers
3. School readiness and before- or after-school programs
4. Training and supervision of qualified school personnel
5. Self-administration of medications by students
6. Procedures in the event of a medication emergency
7. Handling, storage and disposal of medications
8. Documentation and record-keeping
9. Notification and documentation of errors in the administration of medication
10. Procedures for the administration of epinephrine by qualified school employees for the purpose of emergency first aid to students who experience allergic reactions and who do not have a prior written authorization for the administration of epinephrine
11. Procedures for the administration of opioid antagonists by qualified school employees for the purpose of emergency first aid to students who experience an opioid-related drug overdose and do not have a prior written authorization for the administration of an opioid antagonist

School Bus Drivers

For purposes of this policy a “school bus driver” means any person employed by the New Milford Board of Education or by a private carrier who holds a commercial driver’s license with a public passenger endorsement pursuant to subsection (a) of section 14-44 of the Connecticut General Statutes and who transports New Milford Public Schools’ students in a school bus.

Not later than June 30, 2019 all school bus drivers providing transportation services to New Milford Public Schools’ students shall receive training as **required by law** ~~set forth in Public Act 18-185 in~~ (1) the identification of the signs and symptoms of anaphylaxis, (2) the administration of epinephrine by a cartridge injector, (3) the notification of emergency personnel, and (4) the reporting of an incident involving a student and a life-threatening allergic reaction.

Students

Administration of Medication

In accordance with Connecticut General Statutes § 52-557b, school bus drivers on or in the immediate vicinity of a school bus during the provision of school transportation services, who render emergency care by administration of medication with a cartridge injector to a student in need thereof who has a medically diagnosed allergic condition that may require prompt treatment in order to protect the student against serious harm or death, shall not be liable to the student assisted for civil damages for any injuries which result from acts or omissions by the school bus driver in rendering the emergency care of administration of medication with a cartridge injector, which may constitute ordinary negligence.

Biennial Review of Policy and Regulations

This policy and administrative regulations shall be reviewed and revised biennially with the advice and approval of the school medical advisor, school nurse supervisor or other qualified licensed physician.

Legal Reference: Connecticut General Statutes

10-212	School nurses and nurse practitioners. Administration of medications by parents or guardians on school grounds.
10-212a	Administration of medications in schools, at athletic events and to children in school readiness programs
14-11	License endorsement for operators of commercial motor vehicles used for passenger transportation, school buses, student transportation vehicles, taxicabs, motor vehicles in livery service and motor or service buses. Requirements. Hearing. Appeal. Report re persons whose license or endorsement has been withdrawn, suspended or revoked. Penalty.
52-557b	“Good Samaritan law”. Immunity from liability for emergency medical assistance, first aid or medication by injection. School personnel not required to administer or render. Immunity from liability re automatic external defibrillators.

Public Acts

18-185	An Act Concerning the Recommendations of the Task Force on Life-Threatening Food Allergies in Schools
19-60	An Act Allowing Students to Apply Sunscreen Prior to Engaging in Outdoor Activities

Students

Administration of Medication

Regulations of Connecticut State Agencies

10-212a-1 to 10-212a-10 Administration of Medications by School Personnel and
Administration of Medication During Before – and After–
School Programs and School Readiness Programs

Policy adopted: June 12, 2001
Policy revised: June 11, 2002
Policy revised: August 26, 2003
Policy revised: June 24, 2004
Policy revised: September 14, 2004
Policy revised: June 12, 2007
Policy revised: October 13, 2009
Policy revised: June 14, 2011
Policy revised: November 10, 2015
Policy revised: September 18, 2018
Policy revised: February 26, 2019
Policy revised: September 17, 2019

NEW MILFORD PUBLIC SCHOOLS
New Milford, Connecticut

ITEM OF INFORMATION

COMMENTARY: Effective October 1, 2022, Public Act 21-82 recognizes “victim of domestic violence” as a legally protected class under Connecticut law. The Act designates appropriate accommodations that may be afforded to employees who are the victims of domestic violence however those accommodations do not need to be listed out in this regulation. The Act further provides that information and records regarding an employee’s status as a victim of domestic violence be kept confidential to the extent permitted by law.

The Act also immediately requires all employers with three or more employees to post “in a prominent and accessible location information concerning domestic violence and the resources available to victims of domestic violence in Connecticut.” This provision does not need to be reflected in this regulation, but the District must comply with it. The legislation requires the Connecticut Commission on Human Rights and Opportunities (“CHRO”) to develop resources to assist with this obligation.

4111.1(a)

4211.1(a)

Personnel – Certified/Non-Certified

Procedures for Employee Complaints of Discrimination

The New Milford Board of Education provides equal employment opportunities for all employees and applicants for employment. All employment decisions are made without regard to race, color, national origin, sex (including pregnancy), age, disability, religion, sexual orientation, gender identity or expression, marital status, ancestry, genetic information, veteran status, **status as a victim of domestic violence** or any other basis prohibited by law.

“Race” is inclusive of ethnic traits historically associated with race, including, but not limited to, hair texture and protective hairstyles. “Protective hairstyles” includes, but is not limited to, wigs, hairwraps and hairstyles such as individual braids, cornrows, locs, twists, Bantu knots and afro puffs.”

Although discrimination also includes sexual, racial or other unlawful harassment, the prohibition of such conduct is governed by a separate Board policy. Please refer to Board Policy 4118.112, 4218.112 and regulations for the procedure for complaints of sexual, racial or other unlawful harassment.

Employees who believe they have suffered discrimination in violation of this policy are encouraged to promptly report such incidents to a Building Principal or the district’s Title IX Coordinator or both. Timely reporting of incidents of unlawful harassment enables the school district to properly investigate and resolve such complaints.

Complaints will be investigated promptly and corrective action will be taken when warranted. Any reprisals or retaliations found to have occurred as a result of reporting discrimination may result in disciplinary action against the retaliator.

4111.1(b)
4211.1(b)

Personnel – Certified/Non-Certified

Procedures for Employee Complaints of Discrimination

Reporting a Complaint of Discrimination

Any applicant or employee who feels that he/she has been discriminated against on the basis of race, color, national origin, sex, age, disability, religion, sexual orientation, gender identity or expression, marital status, ancestry, genetic information, ~~or~~ veteran status, **status as a victim of domestic violence** or **any other basis prohibited by law** should promptly bring his/her complaint to the attention of one of the following school officials: Building Principal or Title IX Coordinator.

The Title IX Coordinator(s) for the New Milford Board of Education are:

STUDENTS:—

Ms. Holly Hollander _____

Assistant Superintendent

50 East Street _____

New Milford, CT 06776

Phone number: 860-354-3235 _____

hollanderh@newmilfordps.org

STAFF:

Ms. Rebecca Adams

Director of Human Resources

50 East Street

New Milford, CT 06776

860-210-2200

adamsr@newmilfordps.org

Although there is no requirement that the complaint be in writing, the school official should encourage the complainant to submit the complaint in writing and may assist the complainant in writing the complaint.

The written complaint should state the following (the form in Appendix A may be provided for the convenience of the complainant, but is not required):

1. name of the complainant;
2. date that the complaint was made;
3. name(s) of the person(s) who discriminated against complainant;
4. date and place of the alleged discriminatory conduct;
5. names of any witnesses;
6. list of documentary evidence, if any;
7. statement of the facts supporting the complaint of discrimination.

Personnel – Certified/Non-Certified

Procedures for Employee Complaints of Discrimination

Investigation of Complaints of Discrimination other than Harassment

Investigator: The Title IX Coordinator is responsible for designating the investigator of any complaint, which may be himself/herself or a properly trained staff member, administrator or outside investigator. The advice of legal counsel should be sought as necessary. The designation of the investigator, if other than the Title IX Coordinator, shall be done promptly.

During any stage of the investigation, the investigator may attempt to resolve the complaint in the least disruptive, most prompt and confidential manner.

Interim measures: The investigator shall assess whether there is a necessity to take immediate interim measures to prevent further allegations of discrimination or retaliation of any kind while the investigation is pending.

Investigation: The investigation shall be conducted with objectivity and completed in a timely manner. The investigator shall consult with all individuals believed to have relevant information, including the complainant, the person(s) accused of the discriminatory conduct, potential witnesses and other possible victims of the alleged conduct. The investigation shall be carried on discreetly, maintaining confidentiality insofar as possible while still conducting an effective and thorough investigation. Throughout the investigative process, the due process rights of the person(s) accused of discrimination shall be respected. The investigator shall keep the complainant apprised of the status of the investigation on a periodic basis.

Documentation: The investigator should carefully document all aspects of the investigation, including any informal resolution of the complaint. Documentation should be maintained in an investigative file. Documentation of disciplinary actions taken should be maintained in the employee's personnel file or the student's disciplinary file.

Written Report: After an impartial and prompt investigation of the complaint, the investigator should ascertain (1) whether the alleged discrimination occurred and (2) whether such conduct constitutes a violation of the Board's policy. If there is a violation, the investigator should recommend any remedial action appropriate to redress the discrimination and/or prevent any recurrence of such conduct in the future. The investigator should commit the findings and recommendations to writing and forward the report to the Title IX Coordinator and Superintendent of Schools. Unless unusual circumstances exist, the written report shall be completed without delay. If the Superintendent is the subject of the investigation, the Board of Education shall receive the findings and recommendations.

Personnel – Certified/Non-Certified

Procedures for Employee Complaints of Discrimination

Notification of Results of Investigation: The results of the investigation will be promptly communicated to the parties involved in a manner consistent with state and federal laws regarding data and records privacy.

Request for Review: If the complainant is unsatisfied with the results of the investigation, he/she may request a review by the Superintendent of Schools within 10 school days of the notification of the results of the investigation. The Superintendent (or designee) shall review the investigator's written report and further investigation may be conducted if necessary. The complainant may present additional evidence or witnesses for the reviewer to consider. Absent unusual circumstances, the Superintendent shall promptly notify the complainant in writing of the results of his/her review.

Corrective Action: If discrimination in violation of Board policy has been determined to have occurred, the school district will take prompt remedial action to redress the discrimination. School district action taken for violation of this policy shall be consistent with the requirements of applicable collective bargaining agreements, state and federal law, and other school district policies.

Alternative Complaint Procedures

The Connecticut Commission of Human Rights and Opportunities (CHRO) investigates complaints of employment discrimination based upon race, color, national origin, sex (**including pregnancy**), age, disability, religion, sexual orientation, gender identity or expression, marital status, ancestry, ~~or~~ genetic information, **veteran status or status as a victim of domestic violence**. CHRO may be contacted at 21 Grand Street, Hartford, CT 06106 (860-541-5737).

The U. S. Equal Employment Opportunity Commission (EEOC) investigates complaints of employment discrimination based upon race, color, sex, religion, national origin, age, or disability. The EEOC may be contacted at John F. Kennedy Federal Building, 475 Government Center, Boston, MA 02203, 1-800-669-4000.

The EEOC and CHRO apply a statute of limitation of one hundred and eighty (180) days to complaints of employment discrimination.

The U. S. Department of Labor, Veteran's Employment and Training Service investigates complaints of discrimination based upon veteran status. The Veteran's Employment and Training Service may be contacted at 1-866-4-USA-DOL.

4111.1(e)
4211.1(e)

Personnel – Certified/Non-Certified

Procedures for Employee Complaints of Discrimination

Regulation adopted: June 14, 2011
Regulation revised: October 11, 2011
Regulation revised: February 24, 2015
Regulation revised: August 17, 2021
Regulation revised: June 7, 2022

NEW MILFORD BOARD OF EDUCATION
New Milford, Connecticut

ITEM OF INFORMATION

COMMENTARY: Public Act 22—80 amends school medication administration laws to allow school nurses – or during their absence/unavailability – qualified/trained school employees to administer “opioid antagonists” (i.e. Narcan) to students experiencing an opioid-related drug overdose who do not have prior written authorization from a parent or a prior order from a qualified medical professional.

Public Act 22-80 requires the State Department of Education and Department of Consumer Protection to jointly develop guidelines on the storage and administration of opioid antagonists in schools by October 1, 2022 so further changes may be needed to this regulation once the guidelines are published.

5141.21(a)

Students

Administration of Medications

The Board of Education has authorized the Superintendent of Schools to develop the following procedures concerning the administration of medications to students within the school system by a licensed nurse or, in the absence of a nurse, by qualified personnel for schools. These administrative regulations have been developed with the advice and approval of the school medical advisor and the school nurse supervisor. Nothing in these regulations prohibits parents or guardians from administering medication to their own children on school grounds.

I. Administration of Medications by Qualified Personnel for Schools

A school nurse or any other nurse licensed in the state of Connecticut may administer medications to students in school. In the absence of a licensed nurse, only qualified personnel who have been properly trained may administer medication to students as delegated by the school nurse. Administration of medications by qualified personnel shall be under the general supervision of the school nurse.

A. General Principles

1. Prescribed medication will be administered during school hours, only if it is not possible to achieve the desired effect by home administration.
2. Medication will be administered during field trips and school sponsored activities by qualified school personnel, or the parent/guardian. Students will be permitted to self-carry medication provided New Milford Administrative Regulations, Section IV are followed.
3. Qualified personnel are not authorized to administer “standing order” medications while on field trips if nurse is not present.
4. A current list of qualified personnel authorized to give medication shall be maintained in each school.

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5. The school medical advisor and the school nurse coordinator shall review and revise the procedures concerning the administration of medications as needed, but at least biannually.

B. Qualified Personnel for Schools includes the following:

1. Principals, teachers, licensed athletic trainers, licensed physical or occupational therapists employed full-time by the Board;
2. Coaches and licensed athletic trainers (subject to the conditions below);
3. Paraprofessionals (subject to the conditions below);
4. Directors (or directors' designees), lead teachers and administrators of school readiness programs and before- or after-school programs.

C. Basic prerequisites

Except as permitted in Section E below, no medication may be administered to students by any school personnel without documentation of the following in the student's health record:

1. The written order of an authorized prescriber;
2. The written authorization of a parent, guardian or eligible student; and
3. The written permission for the exchange of information between the prescriber and the school nurse necessary to ensure safe administration of the medication;
4. Prescribed medication shall be only administered to, and taken by, the person for whom the prescription is written.

D. Medications that may be administered

1. Qualified personnel for schools may administer oral, topical, intranasal or inhalant medications;
2. Medications with a cartridge injector may be administered by qualified personnel for schools only to a student with a medically-diagnosed allergic condition which may require prompt treatment to protect the student against serious harm or death;
3. Glucagon. Qualified school employees may administer medications with injectable equipment used to administer glucagon to a student with diabetes who requires prompt treatment in order to protect the student against serious harm or death. This is limited to situations where the school nurse is unavailable and the qualified personnel have been specially trained and approved to use such equipment.
4. Qualified personnel for schools may not administer investigational drugs or research study medications.

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5. Antiepileptic Medication. Qualified school employees may administer antiepileptic medication, including by rectal syringe, to a specific student with a medically diagnosed epileptic condition that requires prompt treatment in accordance with the student's individual seizure action plan. Such authorization shall be limited to situations when the school nurse is absent or unavailable. No qualified school employee shall administer antiepileptic medication unless: (i) such qualified school employee annually completes the required training program for antiepileptic medication administration; (ii) the school nurse and school medical advisor have attested, in writing, that such qualified school employee has completed such training; (iii) such qualified school employee receives monthly reviews by the school nurse to confirm such qualified school employee's competency to administer antiepileptic medication under this subsection; and (iv) such qualified school employee voluntarily agrees to serve as a qualified school employee.

E. Epinephrine as Emergency First Aid for Students Who Do Not Have Prior Written Authorization or Order

Epinephrine may be administered as emergency first aid to students who experience allergic reactions but do not have a prior written authorization of a parent or guardian or the written order of a qualified medical professional. Such administration may be done by a school nurse or, when the school nurse is absent or unavailable, by a qualified school employee who has completed the training required by law to administer emergency epinephrine.

A school nurse or in the absence of a school nurse, at least one qualified school employee who has been trained will be on the grounds of each school in the district during regular school hours.

Notice to Parents Regarding Opt-Out

The parent or guardian of a student may submit, in writing, to the school nurse a notice that epinephrine shall not be administered to such student. The school district shall annually notify parents or guardians of the need to provide such written notice.

Procedures for the Administration of Epinephrine as Emergency First Aid

The school nurse supervisor for the district shall:

1. Determine the level of nursing services and number of qualified school employees needed to ensure coverage at each school during regular school hours. This includes consulting with district administrators to establish awareness of the regular school hours for each school.

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2. Consult with the school medical advisor or other licensed physician to determine the supply of epinephrine in cartridge injectors that shall be available in each school in the district.
3. Coordinate with each school principal and school nurse to select qualified school employees from employees who volunteer to complete the training required to administer epinephrine as emergency first aid.
4. Develop a mechanism within each school to ensure communication to one or more qualified school employees and other staff that the school nurse is absent or unavailable and that a qualified school employee shall be responsible for the emergency administration of epinephrine.
5. Develop a mechanism to ensure that persons who will administer epinephrine as emergency first aid to students who experience allergic reactions but who do not have a prior written authorization of a parent or guardian or prior written order of a qualified medical professional for the administration of epinephrine, are notified of the students whose parents have refused the emergency administration of epinephrine.

Emergency Epinephrine Training for Qualified School Employees

Qualified school employees who administer epinephrine as emergency first aid shall, annually, complete the training program developed by the Departments of Education and Public Health, in consultation with the School Nurse Advisory Council, pursuant to state law and training in cardiopulmonary resuscitation (CPR) and first aid.

Reporting of the Emergency Administration of Epinephrine

A qualified school employee shall immediately report the emergency administration of epinephrine to a student who does not have a prior written authorization or order to the school nurse. The school nurse or the qualified school employee shall immediately notify the student's parent or guardian.

A medication administration record shall be submitted to the school nurse by the qualified school employee at the earliest possible time, but not later than the next school day, and documentation of the medication administration shall be made in the student's cumulative health record.

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F. Opioid Antagonists as Emergency First Aid for Students Who Experience an Opioid-Related Drug Overdose and Do Not Have Prior Written Authorization or Order

Opioid antagonists may be administered as emergency first aid for students who experience an opioid-related drug overdose and do not have a prior written authorization of a parent or guardian or the written order of a qualified medical professional for the administration of such opioid antagonist. A school nurse or school principal shall select qualified school employees to administer such opioid antagonists and there shall be at least one such qualified employee on school grounds during regular school hours in the absence of a school nurse. Such administration may be done by a school nurse or, when the school nurse is absent or unavailable, by a qualified school employee provided such administration is in accordance with Board policies and procedures.

No school nurse or qualified school employee shall administer an opioid antagonist unless such school nurse or qualified school employee completes a required training in the distribution and administration of an opioid antagonist.

Notice to Parents Regarding Opt-Out

The parent or guardian of a student may submit, in writing, to the school nurse or school medical advisor a request in writing that opioid antagonists shall not be administered to such student.

Procedures for the Administration of Opioid Antagonists as Emergency First Aid

The school nurse supervisor for the district shall:

1. Determine the level of nursing services and number of qualified school employees needed to ensure coverage at each school during regular school hours. This includes consulting with district administrators to establish awareness of the regular school hours for each school.
2. Consult with the school medical advisor or other licensed physician to determine the supply of opioid antagonists that shall be available in each school in the district.
3. Coordinate with each school principal and school nurse to select qualified school employees from employees who volunteer to complete the training required to administer opioid antagonists as emergency first aid.

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4. Develop a mechanism within each school to ensure communication to one or more qualified school employees and other staff that the school nurse is absent or unavailable and that a qualified school employee shall be responsible for the emergency administration of opioid antagonists.
5. Develop a mechanism to ensure that persons who will administer opioid antagonists as emergency first aid to students who experience an opioid-related drug overdose and do not have a prior written authorization of a parent or guardian or the written order of a qualified medical professional for the administration of such opioid antagonist, are notified of the students whose parents have refused the emergency administration of opioid antagonists.

Emergency Opioid Antagonist Administration Training for Qualified School Employees

Qualified school employees who administer opioid antagonists as emergency first aid shall complete all training in the administration of opioid antagonists that may be required by the District or by law.

Reporting of the Emergency Administration of Opioid Antagonists

A qualified school employee shall immediately report the emergency administration of an opioid antagonist to a student who does not have a prior written authorization or order to the school nurse. The school nurse or the qualified school employee shall immediately notify the student's parent or guardian.

A medication administration record shall be submitted to the school nurse by the qualified school employee at the earliest possible time, but not later than the next school day, and documentation of the medication administration shall be made in the student's cumulative health record.

II. Limitations of School Personnel

A. Licensed practical nurses

Licensed practical nurses may administer medications to students only after the medication plan has been established by the school nurse and if they can demonstrate evidence of one of the following:

1. Training in administration of medications as part of their basic nursing program;
2. Successful completion of a pharmacology course and subsequent supervised experience;

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3. Supervised experience in the administration of medication while employed in a health care facility.

In addition, licensed practical nurses may not train or delegate administration of medications to another individual.

B. Paraprofessionals

Paraprofessionals may only administer medications to a specific student in order to protect that student from harm or death due to a medically-diagnosed allergic condition and in accordance with the following:

1. Only with approval by the school medical advisor and school nurse, in conjunction with the school nurse supervisor, and under the supervision of the school nurse;
2. With a proper medication authorization from the authorized prescriber;
3. With parental permission for the paraprofessional to administer the medication in school;
4. Only medications necessary for prompt treatment of an allergic reaction, including, but not limited to cartridge injector; and
5. The paraprofessional shall receive proper training in the administration of medication and supervision from the school nurse.

C. Coaches and Licensed Athletic Trainers: For students who can self-carry

Students who have written authorization on file in the nurses office from an authorized prescriber, parent/guardian or eligible student to self-administer medication, may retain possession of medication at all times, including for after-school sports.

The following conditions shall be met:

1. The nurse provides the coach with a copy of the authorized prescriber's order and parental permission form, in addition to a copy of an Emergency Care Plan.
2. Should a student be unable to appropriately perform the administration of emergency cartridge injector for severe allergic reaction, coach will intervene and administer medication as prescribed.
3. Cartridge injector administration procedure reviewed with coach.

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D. Coaches and Licensed Athletic Trainers: For students who self-administer medication is not a viable option

During intramural and interscholastic athletic events, a coach or licensed athletic trainer may administer medication for select students for whom self-administration plans are not viable options as determined by the school nurse for (A) inhalant medications prescribed to treat respiratory conditions and (B) medication administered with a cartridge injector for students with a medically diagnosed allergic condition which may require prompt treatment to protect the student against serious harm or death.

The following conditions must be met:

1. The coach must be trained in the general principles of the administration of medication applicable to receiving, storing and assisting with inhalant medications or cartridge injector medications and documentation as well as the specific needs of the student needing assistance according to the individualized medication plan.
2. The school nurse shall provide a copy of the authorized prescriber's order and the parental permission form to the coaches;
3. The parent or guardian shall provide the medication to the coach or licensed athletic trainer according to the district's procedures regarding the safe handling of medications [see Section VIII (A)-(C) below]. The medication provided by the parent or guardian shall be separate from the medication stored in the school health office for use during the school day.
4. The coach or licensed athletic trainer shall agree to the administration of emergency medication and shall implement the emergency care plan.
5. Medications to be used in athletic events shall be stored in containers for the exclusive use of holding medications, in locations that preserve the integrity of the medication, under the general supervision of the coach or licensed athletic trainer trained in the administration of medication and locked in a secure cabinet when not in use at athletic events.
6. Errors in the administration of medication shall be addressed in the same manner as errors during the school day, except that if the nurse is not available, a report may be submitted by the coach or licensed athletic trainer to the school nurse on the next school day.
7. The coach or licensed athletic trainer shall document administration of medication on forms for individual administration of medication and the school nurse shall be notified of:
 - a. A separate medication administration record for each student shall be maintained in the athletic area;

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- b. Administration of a cartridge injector medication shall be reported to the school nurse at the earliest possible time but not later than the next school day;
- c. All other instances of the administration of medication shall be reported to the school nurse at least monthly or as frequently as required by the individual student plan;
- d. The administration of medication record shall be submitted to the school nurse at the end of each sport season and filed in the student's cumulative health record.

III. Training and Supervision of Qualified Personnel

The school nurse or school medical advisor shall train designated qualified personnel in the safe administration of medications at least annually. Only qualified personnel for schools who have successfully completed such annual training may administer medications to students. Licensed practical nurses shall not train other individuals in the administration of medication.

A. Content of training

Training shall include at least the following:

1. The general principles of safe administration of medication;
2. The procedural aspects of administration of medication, including the safe handling and storage of medications, documentation;
3. Specific information related to each student's medication and each student's medication plan, including the name and generic name of the medication, indications for medication, dosage, routes, time and frequency of administration, therapeutic effects of the medication, potential side effects, overdose or missed dose of the medication and when to implement emergency interventions.
4. Administration of medication with injectable equipment used to administer glucagon for students with diabetes. Such training will only be provided to school personnel who volunteer to provide this form of medication administration.

B. Documentation of training sessions

The Supervisor of Schools Nurses shall maintain documentation of the administration of medication training as follows:

1. Dates of general and student-specific trainings;
2. Content of the training;

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3. Names of individuals who have successfully completed general and student-specific training for the current school year shall be submitted to the Superintendent by the nursing coordinator on October 31 of each year;
4. A current list of those authorized to give medication shall be maintained in the school;
5. Names and credentials of the nurse or school medical advisor trainers.
6. For training in the administration of medication with injectable equipment used to administer glucagon, both the school nurse and the school medical advisor shall attest in writing of the successful completion of such training.

C. Supervision of Administration of Medications

The school nurse is responsible for general supervision of administration of medications in the schools to which that nurse is assigned, and shall:

1. Review orders and changes in orders, and communicate these to personnel designated to give medication;
2. Set up a medication plan and schedule to ensure medications are administered properly;
3. Provide training to qualified personnel and other licensed nursing personnel in the administration of medications and assess that the qualified personnel for schools are competent to administer medication;
4. Support and assist other licensed nursing personnel to prepare for and implement their responsibilities related to the administration of specific medications during school hours;
5. Provide appropriate follow-up to ensure the administration of medication plan results in the desired outcomes;
6. Provide consultation by telephone or other means of telecommunication. In the absence of the school nurse, an authorized prescriber or other nurse may provide this consultation;
7. Implement policies and procedures regarding all phases of administration of medications;
8. Review periodically all documentation pertaining to the administration of medications for students;
9. Observe competency to administer medication by qualified personnel for schools who have been newly trained;
10. Periodically review, as needed, with licensed personnel and all qualified personnel for schools regarding the needs of any student receiving medication.

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IV. Self-Administration of Medications by Students

Students who have a verified chronic medical condition and are capable of self-administering prescribed emergency medications, including rescue inhalers, cartridge injectors will be permitted to self-administer such medication provided:

- A. The required documentation for self-administering medication at school includes the following items:
 1. The written order must include the recommendation for self-administration by the authorized prescriber renewed annually;
 2. The written authorization of the parent/guardian or eligible student for the self-administration of medication;
 3. An appropriate plan for the self administration of medication is developed by the school nurse including provisions for general supervision and the plan is placed in the student's health record;
 4. Notation in the student's health record of the means by which the Principal and appropriate staff have been notified that the student is self-administering prescribed medication.

- B. An assessment by school nurse of the student's capacity to self-administer in the school setting by considering that student:
 1. Is capable of identifying and selecting the appropriate medication by size, color, amount, or other label identification;
 2. Knows the frequency and time of day for which the medication is ordered;
 3. Can identify the presenting symptoms that require medication;
 4. Administers the medication appropriately;
 5. Maintains safe control of the medication at all times;
 6. Seeks adult supervision whenever warranted; and
 7. Cooperates with the established medication plan; and
 8. Notify authorized prescriber and parent or guardian if the student is unable to demonstrate safe and appropriate self-administration and handling of medication.
 9. Document contact with authorized prescriber and parent or guardian and the outcome.

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- C. In the case of students with medically diagnosed life-threatening allergic conditions, the school nurse's review of a student's competency to self-administer shall not be used to prevent a student from retaining and self-administering such medication. In such cases, students may retain possession of such medication, including inhalers or cartridge injectors, at all times while attending school and while receiving school transportation services and self-administer such medication with only the written authorization of an authorized qualified medical professional and written authorization from a student's parent or guardian.
- D. The medication is transported by the student and maintained under the student's control in accordance with school policy and the student's medication plan.
- E. Self-administration of controlled medication may be considered for extraordinary situations, such as international field trips, and shall be approved by the school nurse supervisor and the school medical advisor in advance and an appropriate plan must be developed.
- F. Self-administration of medications other than inhalers or epipens will be considered on an individual basis. Written authorization must be on file in the nurse's office from an authorized prescriber, parent/guardian or eligible student to self-administer and shall be approved by the school nurse supervisor. The school nurse supervisor may consult the medical advisor regarding any such request for self-administration. An appropriate plan must be developed.
- G. Self-administration or carrying of over the counter medications is not permitted in New Milford Public Schools.
- H. The responsibility of self-administration shall be revoked if the Board of Education Medication Policy for self-administration is violated or if student exhibits behavior that is not safe for student or other students.
- I. Principal and/or appropriate staff will be informed that the student self-administers prescribed medications.
- J. Students with diabetes may conduct blood glucose self-testing with a written order from a physician stating the need and capability of such student to self-test. No school may restrict the time and location of blood glucose testing by a student who has such order and written authorization of the student's parent or guardian.

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V. Medication Errors: Procedure for Notification and Documentation

- A. Medication error means failure to do any of the following as ordered:
 - 1. Administer a medication to a student;
 - 2. Administer a medication within the time designated by the authorized prescriber;
 - 3. Administer the specific medication prescribed for a student;
 - 4. Administer the correct dosage;
 - 5. Administer medication by the proper route; and/or
 - 6. Administer medication according to generally accepted standards practice or;
 - 7. Administration of a medication to a student which is not ordered or authorized by the parent or guardian;
 - 8. Inadvertent destruction, theft or loss by other means of medication stored in school.

- B. If an error in medication administration occurs or is suspected, the school nurse or substitute nurse shall immediately assess the student and:
 - 1. Determine error and potential for emergency;
 - 2. Call 911 if applicable;
 - 3. Implement Standing Orders if applicable;
 - 4. Call Poison Control if applicable (1-800-222-1222);
 - 5. Follow directions of Poison Control-note who you spoke to, time call was made, what directions were given, and what actions you took;
 - 6. Call prescribing practitioner-follow prescriber's directions, if applicable;
 - 7. Notify School Nurse Coordinator;
 - 8. Notify student's parent/guardian;
 - 9. Notify principal/administrator;
 - 10. Monitor student and provide interventions as directed by Poison Control, student's physician, standing orders or nursing protocols, as applicable, until EMS or parent/guardian arrives;
 - 11. Complete Medication Error Report form;
 - 12. Document the incident in the student's electronic health record (SNAP). Describe the error and sequence of events thereafter, including nursing assessment and interventions, medical treatment, and exchanges of information; print and attach SNAP Incident Report to the Medication Error Report form. Send the completed Report and Incident Report form to the School Nurse Coordinator.

- B. If qualified personnel other than the school or substitute nurse make or recognize a medication error, the individual shall immediately notify the school nurse. If the school nurse is not available, the qualified individual shall:

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1. In a true emergency call EMS, then Poison Control if applicable.
 2. If not an immediate emergency, follow the sequence of steps in B.1., and B. 4-9 above and consult, as applicable, with the school nurse if available by phone.
 3. Monitor the student and provide first aid care as directed by Poison Control, the student's physician or the school nurse or school nurse coordinator, as applicable, until EMS or parent/guardian arrives.
 4. Document the incident, including all details, on the Medication Error Report form; use and attach an additional page to complete the documentation as needed.
 5. Send the completed form to the School Nurse Coordinator.
 6. Provide a copy of the completed Medication Error Report form to the school nurse who shall file it in the student's CHR.
- D. A medication error or incident report will be completed by nurse or qualified personnel. A copy will be sent to the nursing coordinator who will review with Pupil Personnel. Pupil Personnel will document any corrective action taken.
- E. Any error in the administration of a medication shall be documented in the student's cumulative health record.

VI. Medication Emergencies

Medication Emergency means a life-threatening reaction of a student to a medication.

- A. Each health office shall post in a prominent location on or near the medication cabinet the following information:
1. The Poison Control information center telephone number 1-800-222-1222;
 2. This section of medication regulations and Section V, Medication Errors;
 3. The name of building administrator responsible for decision making in the absence of a school or substitute nurse.
- C. If qualified personnel other than the school or substitute nurse recognize a potential medication emergency, the qualified individual shall immediately notify the school nurse.
- C. In a medication emergency, the school nurse shall proceed as in Section V, Medication Errors, B 1 – B 10; as indicated by the circumstances.
- D. After managing and documenting in SNAP the medication emergency, the school nurse shall generate an incident report.

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- E. In the absence of a school or substitute nurse, the building administrator responsible for decision making, the qualified individual off site, such as a teacher on a field trip shall proceed as in Section V, Medication Errors C 1 – C 6 as indicated by circumstances.

VII. Handling and Storage of Medications

- A. All medications, except those approved for self-medication or epinephrine intended for emergency administration to students who do not have a written prior authorization or order, shall be delivered by the parent or other responsible adult to the school nurse or, in the absence of such nurse, other qualified personnel for schools trained in administration of medication and assigned to the school. For FDA-approved medications being administered according to an approved study protocol, a copy of the study protocol shall be provided to the school nurse along with the name of the medication to be administered and the acceptable range of dose of such medication to be administered.
- B. The parent/guardian, responsible adult or eligible student shall deliver medication in the original, properly labeled container directly to the school nurse, principal or other qualified school personnel trained in medication administration.
- C. The school nurse, principal, or other qualified school personnel trained in medication administration will record the medication and quantity received. The individual student medication form will be co-signed with the parent/guardian, responsible adult or eligible student.
- D. The nurse shall examine on-site any new medication, medication order and parent authorization form and develop an administration of medication plan for the student before any medication is administered by any school personnel.
- E. The school nurse shall review all medication refills with the medication order and parent authorization prior to any administration of medication.
- F. All medications shall be properly stored as follows:
 - 1. Except as otherwise determined by a student's emergency care plan, emergency medications shall be stored in an unlocked, clearly labeled and readily accessible cabinet or container in the health room during school hours under the general supervision of the school nurse, or in the absence of the school nurse, the principal or the principal's designee who has been trained in the administration of medication;

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2. Emergency medications will be locked beyond the regular school day or program hours, except as otherwise determined by a student's emergency care plan;
 3. All other non-controlled medications except those approved for self-medication, shall be kept in a designated locked container, cabinet or closet used exclusively for the storage of medication; and
 4. Controlled substances shall be stored separately from other medications in a separate, secure, substantially constructed, locked metal or wood cabinet pursuant to state law.
- G. Access to all stored medications shall be limited to persons authorized to administer medications. Each school or before- and after- school program and school readiness program shall maintain a current list of those persons authorized to administer medications.
- H. All medications, prescription and non-prescription, shall be delivered and stored in their original containers. At least two sets of keys for the medication containers or cabinets shall be maintained for each school building or before- and after-school program and school readiness program. One set of keys shall be maintained under the direct control of the school nurse or nurses and an additional set shall be under the direct control of the principal and, if necessary, the program director or lead teacher who has been trained in the general principles of the administration of medication shall also have a set of keys.
- I. Medication requiring refrigeration shall be stored as follow:
1. In a refrigerator at no less than 36°F and no more than 46°F;
 2. The refrigerator shall be located in a health office that is maintained for health services purposes with limited access;
 3. Non-controlled medications may be stored directly on the shelf of the refrigerator with no further protection needed;
 4. Controlled medications shall be stored in a locked box which is affixed to the refrigerator shelf.
- J. No more than a three month supply of a medication for a student shall be stored at the school.
- K. No medication for a student shall be stored at a school without a current written order from an authorized prescriber.

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- L. Each school shall maintain a current list of those persons authorized to administer medications.

VIII. Destruction/Disposal of Medication

At the end of the school year or whenever a student's medication is discontinued by the prescribing physician, the parent or guardian is to be contacted and requested to repossess the unused medication within a seven (7) school day period.

- A. All unused, discontinued or obsolete medications shall be removed from storage areas and either returned to the parent or guardian or, if the medication cannot be returned to the parent or guardian, the medication shall be destroyed in collaboration with the school nurse.
- B. Non-controlled drugs shall be destroyed in the presence of at least one (1) witness. Medication will be destroyed in a non-recoverable fashion as recommended by CTDEP, Office of Pollution Prevention:
1. Keep the medication in its original container;
 2. To protect privacy and discourage misuse of the prescription, cross out the patient's name with a permanent marker or duct tape or remove the label (Chemotherapy drugs may require special handling. Work with your healthcare provider on proper disposal options for this type of medication);
 3. Modify the medications to discourage consumption;
 - For solid medication: such as pills or capsules: add a small amount of water to at least partially dissolve them.
 - For liquid medication: add enough table salt, flour, charcoal, or nontoxic powdered spice, to make a pungent , unsightly mixture that discourages anyone from eating it.
 - For blister packs: wrap the blister packages containing pills in multiple layers or duct or other opaque tape
 4. Seal and conceal;
 - Tape the medication container lid shut with packing or duct tape.
 - Place it inside a non-transparent bag or container such as an empty yogurt or margarine tub to ensure that the contents cannot be seen.
 - Do not conceal medicines in food products because animals could inadvertently consume them.
 5. Discard the container in your trash can; and

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6. The following information is to be charted on the student's health folder and signed by the school nurse and a witness.
 - Date of destruction
 - Time of destruction
 - Name, strength, form and quantity of medication destroyed
 - Manner of destruction of medication
- C. Controlled drugs shall be destroyed in accordance with law, specifically, § 21a-262-3 of the Regulations of the Connecticut State Agencies. School nurse/ nurse coordinator will contact the Drug Control Division of the CT Department of Consumer Protection at 860-713-6065 for assistance. Nurse will follow directions of Drug Control Division, documenting name of the person giving the directions.
- D. Accidental destruction or loss of controlled drugs must be verified in the presence of a second person, including confirmation of the presence or absence of residue and jointly documented on the student medication administration record and on a medication error form. If no residue is present, notification must be made to the Department of Consumer Protection pursuant to 21a-262-3 of the Regulations of the Connecticut State Agencies.

IX. Documentation and Recordkeeping

Each school or before- and after-school program and school readiness program shall maintain an individual medication administration record for each student who receives medication during school or program hours. Transactions shall either be recorded in ink and shall not be altered or recorded electronically in a record that can not be altered.

- A. The individual medication administration record will include:
 1. The name of the student;
 2. The name of the medication, dosage, route and frequency of administration;
 3. The name of the authorized prescriber;
 4. The dates for initiating and terminating the medication including extended school year program;
 5. The quantity received which shall be verified by the adult delivering the medication;
 6. Any student allergies to food or medicine;
 7. The date, time and dose or amount of drug administered.
 8. If the drug was not administered, the omission must be documented; including the reason for omission;
 9. The full written or electronic legal signature of the nurse or qualified personnel for schools administering the medication;

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10. For controlled medications, a medication count which should be conducted and documented at least once a week and co-signed by the assigned nurse and a witness;
 11. The medication administration record shall be made available to the State Department of Education for review until destroyed pursuant to law. The completed medication administration record for non-controlled medications may be destroyed in accordance with Section M8 of the Connecticut Municipality Record Retention Schedule as long as it is superseded by a summary on the student health record.
- B. The following shall be filed in the student's cumulative health record or, for before- and after-school programs and school readiness programs, in the child's program record:
1. The written order of the authorized prescriber;
 2. The written authorization of the parent/guardian to administer the medication;
 3. The written parental permission for the exchange of information by the prescriber and school nurse to ensure the safe administration of such medication.
- C. As to any and all controlled drugs administered at school, the completed medication administration record shall be maintained in the same manner as the non-controlled medications, in addition, a record shall be maintained separate from the student's cumulative file for at least three years that includes:
1. Copies of all physician's orders for controlled drugs;
 2. The original medication administration records;
 3. Each school wherein any controlled drug is administered under the provisions of this section shall keep such records thereof as are required of hospitals under the provisions of subsections (f) and (h) of Connecticut General Statutes §21a-254 and shall store such drug in such manner as the Commissioner of Consumer Protection shall, by regulation, require.
- D. An authorized prescriber's verbal order, including a telephone order, for a change in any medication can be received only by a school nurse. Any such verbal order must be followed by a written order from the authorized prescriber which may be faxed and must be received not later than three (3) school days.

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- E. The completed medication administration record for non-controlled medications may be destroyed in accordance with Section M8 of the Connecticut Municipal Records Retention Schedule, provided it is superseded by a summary on the student's cumulative health record.

X. School Readiness and Before-or After-School Programs¹

Administration of medications shall be provided in school readiness and before- or after-school programs administered and operated by the Board of Education only when it is medically necessary for participants to access the program and maintain their health status while attending the program. All the provisions of these regulations regarding training, supervision, self-administration, documentation, handling, storage, disposal, errors and medication emergencies apply to school readiness and before- and after-school programs. Such programs are subject to the following additional conditions:

- A. At the beginning of each school year, the school nurse supervisor, in consultation with the school medical advisor or other licensed physician, will review the policies and procedures for the administration of medication in these programs and determine the following:
 - 1. The level of nursing services needed in order to ensure safe administration of medication within the programs based on the needs of the program and the program's participants;
 - 2. Who may administer medication and whether a licensed nurse is required on-site;
 - 3. The circumstances under which self-administration of medication by students is permitted;
 - 4. The procedures to be followed in the event of a medication emergency or error and the individuals or facilities to be contacted in such an event;
 - 5. The manner in which the local poison control center information will be made readily available at these programs;
 - 6. The person responsible for decision making in the absence of the nurse.

¹ These regulations do not apply to before-and after-school programs that are administered and operated by the Town of New Milford on school grounds.

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- B. Where possible, a separate supply of medication shall be stored at the site of the before- or after-school or school readiness program. In the event that it is not possible for the parent or guardian to provide a separate supply of medication, then a plan shall be in place to ensure the timely transfer of the medication from the school to the program and back on a daily basis.
- C. Documentation of the administration of medications in school readiness and before- and after-school programs shall be as follows:
 - 1. A separate administration of medication record for each student shall be maintained in the program;
 - 2. Administration of medication with a cartridge injector shall be reported to the school nurse at the earliest possible time but not later than the next school day;
 - 3. All other instances of the administration of medication shall be reported to the school nurse according to the student's individual plan or at least on a monthly basis;
 - 4. The administration of medication record shall be submitted to the school nurse at the end of each school year and filed in or summarized on the student's cumulative health record.

XI. Definition of Terms

The following definitions are derived from Sections 10-212a-1 through 10-212a-10 of the Regulations of Connecticut State Agencies, plus two acronyms used in the procedures, and apply to terms used by New Milford Public Schools for the Administration of Medication.

- 1. **Administration of medication** means any one of the following activities: handling, storing, preparing or pouring of medication; conveying it to the student according to the medication order; observing the student inhale, apply, swallow, or self-inject the medication, when applicable; documenting that the medication was administered; and counting remaining doses to verify proper administration and use of the medication.
- 2. **Advanced practice registered nurse** means an individual licensed pursuant to Section 20-94a of the Connecticut General Statutes.
- 3. **Authorized prescriber** means a physician, dentist, optometrist, advanced practice registered nurse or physician assistant and, for interscholastic and intramural athletic events only, a podiatrist.

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4. **Before- and after-school program** means any child care program operated and administered by a local or regional board of education or municipality exempt from licensure by the Department of Public Health pursuant to subdivision (1) of subsection (b) of Section 19a-77 of the Connecticut General Statutes. Such programs shall not include public or private entities licensed by the Department of Public Health or board of education enhancement programs and extra-curricular activities.
5. **Board of education** means the New Milford Board of Education.
6. **Cartridge injector** means an automatic pre-filled cartridge injector or similar automatic injectable equipment used to deliver epinephrine in a standard dose for emergency first aid response to allergic reactions.
7. **CHR or CHR-1** refers to the cumulative health record (see below).
8. **Coach** means an athletic coach as defined in Section 10-222e of the Connecticut General Statutes.
9. **Commissioner** means the Commissioner of Education or any duly authorized representative thereof.
10. **Controlled drugs** means controlled drugs as defined in Section 21a-240 of the Connecticut General Statutes.
11. **Cumulative health record** means the cumulative health record of a pupil mandated by Section 10-206 of the Connecticut General Statutes.
12. **Dentist** means a doctor of dentistry licensed to practice dentistry in Connecticut pursuant to Chapter 379 of the Connecticut General Statutes, or licensed to practice dentistry in another state.
13. **Department** means the Connecticut State Department of Education or any duly authorized representative thereof.
14. **Director** means the person responsible for the operation and administration of any school readiness program or before-and after-school program.
15. **Eligible student** means a student who has reached the age of eighteen or is an Emancipated minor.
16. **Error** means:
 - a. failure to do any of the following as ordered:
 - administer a medication to a student;
 - administer medication within the time designated by the prescribing practitioner;
 - administer the specific medication prescribed for a student;
 - administer the correct dosage of medication;
 - administer medication by the proper route; and/or
 - administer the medication according to generally accepted standards of practice; or

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- b. administration of a medication to a student which is not ordered, or which is not authorized in writing by the parent or guardian of such student except for the administration of epinephrine for the purpose of emergency first aid pursuant to Section 10-212a of the Connecticut General Statutes and subsection (e) of Section 10-212a-2 of the Regulations of Connecticut State Agencies.
17. **Extracurricular activities** means activities sponsored by local or regional boards of education that occur outside of the school day, are not part of the educational program, and do not meet the definition of before- and after-school programs and school readiness programs.
18. **Guardian** means one who has the authority and obligations of guardianship of the person of a minor, and includes:
 - a. the obligation of care and control, and
 - b. the authority to make major decisions affecting the minor's welfare, including, but not limited to, consent determinations regarding marriage, enlistment in the armed forces and major medical, psychiatric or surgical treatment.
19. **Injector Equipment Used to Inject Glucagon** means an injector or injectable equipment used to deliver glucagon in an appropriate dose for emergency first aid response to diabetes.
20. **Intramural athletic events** means tryouts, competition, practice, drills, and transportation to and from events that are within the bounds of a school district for the purpose of providing an opportunity for students to participate in physical activities and athletic contests that extend beyond the scope of the physical education program.
21. **Interscholastic athletic events** means events between or among schools for the purpose of providing an opportunity for students to participate in competitive contests which are highly organized and extend beyond the scope of intramural programs and includes tryouts, competition, practice, drills, and transportation to and from such events.
22. **Investigational drug** means any medication with an approved investigational new drug (IND) application on file with the Food and Drug Administration (FDA) which is being scientifically tested and clinically evaluated to determine its efficacy, safety and side effects and which has not yet received FDA approval.
23. **Licensed athletic trainer** means a licensed athletic trainer employed by the school district pursuant to Chapter 375a of the Connecticut General Statutes.
24. **Medication** means any medicinal preparation including over-the-counter, prescription and controlled drugs, as defined in Section 21a-240 of the Connecticut General Statutes.
25. **Medication emergency** means a life-threatening reaction of a student to a medication.

Students

Administration of Medications

26. **Medication plan** means a documented plan established by the school nurse in conjunction with the parent and student regarding the administration of medication in school. Such plan may be a stand-alone plan, part of an individualized health care plan, an emergency care plan or a medication administration form.
27. **Medication order** means the written direction by an authorized prescriber for the administration of medication to a student which shall include the name of the student, the name and generic name of the medication, the dosage of the medication, the route of administration, the time of administration, the frequency of administration, the indications for medication, any potential side effects including overdose or missed dose of the medication, the start and termination dates not to exceed a 12-month period, and the written signature of the prescriber.
28. **Nurse** means an advanced practice registered nurse, a registered nurse or a practical nurse.
29. **Occupational therapist** means an occupational therapist employed full-time by the local or regional board of education and licensed in Connecticut pursuant to Chapter 376a of the Connecticut General Statutes.
30. **Opioid Antagonist** means naloxone hydrochloride or any other similarly acting and equally safe drug approved by the federal Food and Drug Administration for the treatment of a drug overdose
31. **Optometrist** means an optometrist licensed to provide optometry pursuant to Chapter 380 of the Connecticut General Statutes.
32. **Paraprofessional** means a health care aide or assistant or an instructional aide or assistant employed by the local or regional board of education who meets the requirements of such board for employment as a health care aide or assistant or instructional aide or assistant.
33. **Physical therapist** means a physical therapist employed full-time by the local or regional board of education and licensed in Connecticut pursuant to Chapter 376 of the Connecticut General Statutes.
34. **Physician** means a doctor of medicine or osteopathy licensed to practice medicine in Connecticut pursuant to Chapters 370 and 371 of the Connecticut General Statutes, or licensed to practice medicine in another state.
35. **Physician assistant** means an individual licensed to prescribe medications pursuant to Section 20-12d of the Connecticut General Statutes.
36. **Podiatrist** means an individual licensed to practice podiatry in Connecticut pursuant to Chapter 375 of the Connecticut General Statutes.
37. **Principal** means the administrator in the school.
38. **Qualified medical professional** means (i) a licensed physician, (ii) a licensed optometrist (iii) an advanced practice registered nurse licensed to or (iv) a physician assistant licensed to prescribe.

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39. **Qualified school employee** means a principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by a school district, coach or school paraprofessional.
40. **Qualified personnel** (A) for schools means a qualified school employee who is (i) a full time employee, or is (ii) a coach, athletic trainer or school paraprofessional, or (B) for school readiness programs and before- and after-school programs, means the director or director's designee and any lead teachers and school administrators who have been trained in the administration of medication.
41. **Research or study medications** means FDA-approved medications being administered according to an approved study protocol. A copy of the study protocol shall be provided to the school nurse along with the name of the medication to be administered and the acceptable range of dose of such medication to be administered.
42. **School** means any educational program which is under the jurisdiction of a board of education as defined by this section excluding extracurricular activities.
43. **School medical advisor** means a physician appointed pursuant to Section 10-205 of the Connecticut General Statutes.
44. **School nurse** means a nurse appointed pursuant to Section 10-212 of the Connecticut General Statutes.
45. **School nurse supervisor** means the nurse designated by the local or regional board of education as the supervisor or, if no designation has been made by the board, the lead or coordinating nurse assigned by the board.
46. **School readiness program** means a program that receives funds from the State Department of Education for a school readiness program pursuant to subsection (b) of Section 10-16p of the Connecticut General Statutes and exempt from licensure by the Department of Public Health pursuant to subdivision (1) of subsection (b) of Section 19a-77 of the Connecticut General Statutes.
47. **Self-administration of medication** means the control of the medication by the student at all times and is self-managed by the student according to the individual medication plan.
48. **SNAP** means the electronic student health record system known as SNAP Health Center.
49. **Supervision** means the overseeing of the process of the administration of medication in a school.
50. **Teacher** means a person employed full time by a board of education who has met the minimum standards as established by that board of education for performance as a teacher and has been approved by the school medical advisor and school nurse to be designated to administer medications pursuant to Sections 10-212a-1 through 10-212a-7 of the Regulations of Connecticut State Agencies.

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Legal References:

Connecticut General Statutes:

- 10-16p Definitions. Lead agency for school readiness
- 10-212 School nurses and nurse practitioners. Administration of medications by parents or guardians on school grounds
- 10-212a Administration of medications in schools, at athletic events and to children in school readiness programs
- 10-220j Blood glucose self-testing by children. Guidelines
- 21a-240 Definitions
- 21a-254 Designation of restricted drugs or substances by regulations

Regulations of Connecticut State Agencies:

- 10-212a-1 to 10-212a-10, Administration of Medications by School Personnel and Administration of Medication During Before- and After-School Programs and School Readiness Programs
- 21a-262-3, Disposition of drugs

Regulation approved: June 12, 2001
Regulation revised: June 11, 2002
Regulation revised: August 26, 2003
Regulation revised: June 14, 2011
Regulation revised: October 9, 2012
Regulation revised: October 20, 2015
Regulation revised: February 5, 2019

NEW MILFORD PUBLIC SCHOOLS
New Milford, Connecticut

Students

Dress and Grooming

1. In order to promote a positive learning environment the Board of Education supports these standards for safe and appropriate student dress; nothing in this policy shall be intended to infringe upon students' freedom of expression or their religious beliefs.
 - a. Headwear: All headwear shall be removed prior to entering school and must be placed in the students' locker or where outer garments are stowed, for the entire school day.
 - b. Blouses/Shirts: Blouses/shirts should be constructed so that the tops of the shoulders are covered. Blouses/shirts will not allow exposure of any portion of the waist, hips, midriff or exposure of the chest.
 - c. Skirts/Shorts/Dresses/Pants: Skirts, shorts and dresses should have hemlines that are mid-thigh. With safety as our primary concern, pants should be worn to stay close to the waist; undergarments shall be completely covered.
 - d. Outdoor Garments: All outdoor garments will be placed in the students' locker immediately upon entering the school and will remain there for the entire school day.
 - e. Shoes: Safe footwear must be worn at all times.
 - f. Attire: Attire that displays indecent language, pictures or symbols that contain sexual references, or that advertise or encourage the use of drugs, tobacco products, alcoholic beverages are prohibited. Messages of violence or gang allegiance are prohibited. Pajamas, slippers and other lounging attire are not allowed.
 - g. Accessories: Students may not wear accessories that could cause injury to others or that are substantially or materially disruptive of the education process.
2. The school administration and faculty are responsible for the implementation of this policy. Exceptions to the above dress standards will be considered for medical reasons, special events and cultural beliefs or to promote school spirit as determined by the school principal or his/her designee.
3. When the above stated standards have not been met, any or all of the following will occur:
 - a. individual counseling;
 - b. sending the student home to change and return to school;
 - c. parental conferences;
 - d. suspension for insubordination (refusal to change and/or follow the directions of the administration/designee).

Legal Reference: Connecticut General Statute § 10-233 et seq.
10-221f School Uniforms

Policy adopted: June 12, 2001
Policy revised: June 24, 2004
Policy revised: June 13, 2006
Policy revised: June 12, 2007
Policy revised: March 12, 2013

NEW MILFORD PUBLIC SCHOOLS
New Milford, Connecticut

School-Based Advisory Group Dress and Grooming Policy 5132



Presentation to the New Milford Board of Education Policy Committee
May 3, 2022

Background:

The Assistant Superintendent and the Principal of New Milford High School was asked to form a workgroup to discuss the district's current dress code policy and gain insight and comments from stakeholder groups.

The feedback gathered would be shared with the Policy Committee for consideration as they review NMPS Policy 5132 for possible revision.

The last revision of NMPS Policy 5132 was in 2001.

Our Work

1. Identify purpose of the group
2. Create a work plan
3. Review current [NMPS policy 5132](#)
4. Review existing policies (DRG and [SWC](#))
5. Conduct a [“+/ \$\Delta\$ ”](#) record and share [results](#)
6. Gain stakeholder feedback: [results](#)
7. Identify and communicate emergent themes
8. Share [findings](#) with the Policy subcommittee

Committee and Stakeholder Participation

A small working group was formed comprised of parents, students, teachers and administrators.

Stakeholders input was expanded to include feedback from student and faculty focus groups.

A total of 16 individuals contributed and participated in this effort.

Purpose of a Dress Code

- The goals of existing dress codes is to promote a safe, disciplined school environment, to prevent interference with schoolwork and discipline.
- Many Connecticut school districts have enacted dress codes. Within certain limits such codes are enforceable. The provisions of the code must promote legitimate educational interests. These interests include the need to avoid disruption of the educational process, student safety or maintenance of the physical plant. In addition to a valid reason for dress codes, the code must be enforceable and be fairly applied.

Guiding Our Review

As we reviewed the dress code policies we used the following headings to gather data for comparison:

- Hat
- Outerwear
- Accessories
- Language
- Current fashion trends
- Health and Safety
- Sports

Comparison with Our DRG and Area Districts

5.side-by-side comparison of our district policy to other districts

School	Hats	Shoes	Outerwear	Blouse: midriff/strap	Inappropriate language	Health & Safety	Accessories	Sport Inequity
Bethel	N	Y	Y	Y/Y	Y	Y	N	N
Brookfield	N	Y	N	N/N	Y	Y	N	N
Joel Barlow	N	...	N	N/N	...	Y	N	N
Masuk	N	Y	Y	...	Y	Y	Y	N
New Fairfield	Y <small>(IF GANG RELATED)</small>	Y	Y <small>(IF GANG RELATED)</small>	Y/Y	Y	--	Y	... (gym)
New Milford	Y	Y	Y	Y/Y	Y	Y	Y	N
Newtown	N	Y	N	Y/N		Y	Y	N
Pomperaug	Y	Y	Y	Y/Y	Y	Y	Y	N
Stratford	Y	Y	Y	Y/Y	Y	Y	N	N
Weston	N	...	N	N/N	...	Y	N	N

Our Analysis

Pluses

- Policies included a clear purpose
- Details were included to explain or clarify the specific items addressed.
- Policies stated the interventions to address student who violate the dress code
- Statements to address language or symbols that were inappropriate or sexual in nature.
- Acknowledges students' freedom of expression or religious beliefs
- Policies addressed exceptions such as medical, special events or other

Deltas

- Most policies reviewed were gender specific
- Need to address headwear (hats and hoods) in a way that supports safety rather than an all or nothing.
- Consideration of current fashion trends - example - cut out shoulders.
-

Stakeholder Feedback

Representation

Students 6-12

Teachers

Administrators

Total number - 150 individuals

Themes from our Conversations

Stakeholders (teachers and students)

- were aware that there is a dress code for NMHS but many students said that they only knew parts of it and didn't understand all of it
- believed that the sections such as headwear (5132.1b) should be reviewed.
- believed that some type of dress code should exist in schools.
- believed that there should be some standards of what is worn to school.
- believed that the section on accessories (5132.1g) should be reviewed and removed.
- expressed that the trends and popular stores make it difficult to find clothes that meet the dress code guidelines
- believed that the current dress code affects female and male students differently.
- stated that the current dress code is not consistently enforced or effective.
- felt that females were subjected to “dress coding” more than their peers.

Our Findings

- Our district policy was similar to others that were reviewed.
- Inequities with attire (male/female)
- Current trends in clothing styles are not taken into consideration and are not addressed equitably
 - Midriff, Strap, and Shoulder exposure
- Accessories do not address current styles
- Shoe safety should be clarified
- Consideration of outer garments and hoods including baseball style hats
- Adding a section about education and *process* for “dress coding” for students and staff in an issue needs to be addressed regarding a potential violation
- Adding a restorative component to 5132(3) to address infractions

Considerations for the Policy Committee ~ Dress Code Revision

Policy Implementation - Education for Students and Faculty

- Parent Responsibility

- Staff Responsibility

- Student Responsibility

- Enforcement

Articulated attire that addresses the minimum including:

- Heading covering

- Undergarment coverage

- Shoes

- Expected coverage on the body

- Any restrictions

- Sensitivity to religious, moral discrimination to civil rights

Next Steps

Review findings and recommendations as you review our current policy for possible revision.

[CABE Policy 5132](#)

Questions

