

**Regional School District #4
Chester – Deep River – Essex – Region 4**

**AGENDA & NOTICE FOR JOINT BOARD OF EDUCATION
POLICY COMMITTEE MEETING**

To: Members of the Chester, Deep River, Essex, and Region 4 Joint BOE Policy Committee
Subject: April 24, 2019 Joint BOE Policy Committee Meeting
Time & Place: **6:00 p.m.** in Central Office Large Conf. Rm

If you are unable to be in attendance, please e-mail jbryan@reg4.k12.ct.us.

Mission Statement

We, the communities of Chester, Deep River, Essex and Region 4, engage all students in a rigorous and collaborative educational program. We prepare our learners to be respectful citizens who are empowered to contribute in a globalized society.

AGENDA

- a. **Call to order: Chair of the Policy Committee - TBD**
- b. **Policies for review & discussion**
 - b.1 Continue Review #5141.21 Administering Medication (encl #1)
 - b.2 Review #6172.6 Virtual High School (encl #2)
 - b.3 Review **Joint BOE Finance Committee recommendation for NO** revisions to the following policies:
 - b.3.a) #3432 Budget and Expense Report (encl #3)
 - b.3.b) #3434 Periodic Audit (encl #4)
 - b.4 Review **Joint BOE Finance Committee recommended revisions** for the following policies:
 - b.4.a) #3453 Student Activity Funds (encl #5)
 - b.4.b) #3300 Purchasing Authority (encl #6)
 - b.5 Continue discussion and review sample policy for #1325 Advertising in Schools (encl #7)
- c. **Administration Policies 5000 & 6000 Series – Finish 5000s and then continue review of all policies in the series last updated prior to the year 2009**

Policy #: 5131.7 Hold - Revisit later
- c. **Future Agenda Items:** Continue review of policies last updated prior to 2009 – move on to 6000s once done with 5000s

Encl #1

- 1) CURRENT Policy
- 2) Followed by S&G Model Policy - which is what is already distributed to parents as part of the legally required annual notifications (so recommending adoption of S&G would bring policy manual in line with annual notifications)

5141.21(a)

Students

Administering Medications

Medicinal preparations shall be administered in the schools only when it is not possible to achieve the desired effects by home administration during other than school hours and only upon written authorization of the attending physician, dentist, advanced practice registered nurse or nurse anesthetists, or licensed physician assistant and written authorization of the parent or guardian.

Personnel authorized to administer medicinal preparations shall be limited to the school district medical advisor (M.D.), a school nurse (RN), or a licensed practical nurse (L.P.N.) if approved to do so by the school district medical advisor or school nurse. In the absence of these medical personnel, the principal or a teacher designated in writing by the principal shall be permitted to administer authorized medicinal preparations upon completion of training in the safe administration of medicinal preparations and be familiar with policy and regulations relating thereto. School health aides are not allowed to administer medicinal preparations. In an emergency, if the student's physician or the school district medical advisor is not immediately available, any physician (M.D.) may be called to take appropriate emergency measures.

Students in grades 7 through 12 may carry and self-administer medicinal preparations, provided that:

1. A physician, dentist, advanced practice registered nurse or nurse anesthetists, or licensed physician assistant provides written orders for self-administration of medication;
2. There is written authorization for self-administration of medication from the student's parent or guardian;
3. The school nurse has evaluated the situation and deemed it to be safe and appropriate; has documented this on the student's cumulative health record; and has developed a plan of general supervision of such self-medication;
4. The student and school nurse have developed a plan for reporting and supervising self-administration of medications by students and teacher notification;
5. The principal and appropriate teachers are informed that the student is self-administering prescribed medication;
6. Medication is transported and maintained under student control within guidelines. Authorized medicinal preparations may be administered during school activities as well as during school hours.

The Board of Education with the advice and assistance of the school district medical advisor and the school nurse supervisor, shall review and revise this policy, and its attendant regulation, as necessary and at least biennially and submit it to the Connecticut Department of Health Services as required by Connecticut Regulations of State Agencies.

Students

Administering Medications (continued)

Each school wherein any controlled drug is administered under the provisions of this policy shall maintain such records as are required of hospitals under the provisions of subsections (f) and (h) of section 21a-254 and shall store such drug in such a manner as the Commissioner of Health Services shall, by regulation, require.

Legal Reference: Connecticut General Statutes

10-212a Administration of medicines by school personnel.

52-557b Immunity from liability for emergency medical assistance, first aid or medication by injection. School personnel not required to administer or render.

Connecticut Regulations of State Agencies 10-212a-1 through 10-212a-7

Policy adopted: November 10, 1997

CHESTER PUBLIC SCHOOLS
DEEP RIVER PUBLIC SCHOOLS
ESSEX PUBLIC SCHOOLS
REGIONAL SCHOOL DISTRICT No. 4

**Series 5000
Students**

**ADMINISTRATION OF
STUDENT MEDICATIONS IN THE SCHOOLS**

A. Definitions

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.

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

Before or After School Program means any child care program operated and administered by a local or regional board of education exempt from licensure by the Office of Early Childhood pursuant to subdivision (1) of subsection (b) of Section 19a-77 of the Connecticut General Statutes. Such programs do not include public or private entities licensed by the Office of Early Childhood or board of education enhancement programs and extra-curricular activities.

Cartridge Injector means an automatic prefilled cartridge injector or similar automatic injectable equipment used to deliver epinephrine in a standard dose for emergency first aid response to allergic reactions.

Coach means any person holding a coaching permit who is hired by a local or regional board of education to coach for a sport season.

Controlled drugs means those drugs as defined in Conn. Gen. Stat. Section 21a-240.

Cumulative health record means the cumulative health record of a pupil mandated by Conn. Gen. Stat. Section 10-206.

Director means the person responsible for the day-to-day operations of any school readiness program or before-and-after school program.

Eligible student means a student who has reached the age of eighteen or is an emancipated minor.

Error means:

- (1) the failure to do any of the following as ordered:
 - (a) administer a medication to a student;
 - (b) administer medication within the time designated by the prescribing physician;
 - (c) administer the specific medication prescribed for a student;
 - (d) administer the correct dosage of medication;
 - (e) administer medication by the proper route;
 - (f) administer the medication according to generally accepted standards of practice; or
- (2) the administration of 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 or naloxone for the purpose of emergency first aid as set forth in Sections D and E below.

Guardian means one who has the authority and obligations of guardianship of the person of a minor, and includes: (1) the obligation of care and control; and (2) 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.

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.

Interscholastic athletic events means events between or among schools for the purpose of providing an opportunity for students to participate in competitive contests that are highly organized and extend beyond the scope of intramural programs and includes tryouts, competition, practice, drills and transportation to and from such events.

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.

Licensed athletic trainer means a licensed athletic trainer employed by the school district pursuant to Chapter 375a of the Connecticut General Statutes.

Medication means any medicinal preparation, both prescription and non-prescription, including controlled drugs, as defined in Conn. Gen. Stat. Section 21a-240. This definition includes Aspirin, Ibuprofen or Aspirin substitutes containing Acetaminophen.

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

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.

Medication order means the authorization 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.

Nurse means an advanced practice registered nurse, a registered nurse or a practical nurse licensed in Connecticut in accordance with Chapter 378, Conn. Gen. Stat.

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.

Optometrist means an optometrist licensed to provide optometry pursuant to Chapter 380 of the Connecticut General Statutes.

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 of employment as a health care aide or assistant or instructional aide or assistant.

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.

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.

Podiatrist means an individual licensed to practice podiatry in Connecticut pursuant to Chapter 375 of the Connecticut General Statutes.

Principal means the administrator in the school.

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.

School means any educational facility or program which is under the jurisdiction of the Board excluding extracurricular activities.

School nurse means a nurse appointed in accordance with Conn. Gen. Stat. Section 10-212.

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.

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 Office of Early Childhood pursuant to subdivision (1) of subsection (b) of Section 19a-77 of the Connecticut General Statutes.

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.

Teacher means a person employed full time by the Board who has met the minimum standards as established by the Board 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 the Regulations of Connecticut State Agencies Sections 10-212a-1 through 10-212a-7.

B. General Policies On Administration of Medications

- (1) Except as provided below in Section D, no medication, including non-prescription drugs, may be administered by any school personnel without:
 - (a) the written medication order of an authorized prescriber;
 - (b) the written authorization of the student's parent or guardian or eligible student; and

- (c) the written permission of a parent for the exchange of information between the prescriber and the school nurse necessary to ensure safe administration of such medication.
- (2) Prescribed medications shall be administered to and taken by only the person for whom the prescription has been written.
- (3) Except as provided in Section D, medications may be administered only by a licensed nurse or, in the absence of a licensed nurse, by:
 - (a) a full-time principal, a full-time teacher, or a full-time licensed physical or occupational therapist employed by the school district. A full-time principal, teacher, licensed physical or occupational therapist employed by the school district may administer oral, topical, intranasal or inhalant medications. Such individuals may administer injectable medications only to a student with a medically diagnosed allergic condition that may require prompt treatment to protect the student against serious harm or death.
 - (b) students with chronic medical conditions who are able to possess, self-administer, or possess and self-administer medication, provided all of the following conditions are met:
 - (i) an authorized prescriber provides a written medication order, including the recommendation for possession, self-administration, or possession and self-administration;
 - (ii) there is a written authorization for possession, self-administration, or possession and self-administration from the student's parent or guardian or eligible student;
 - (iii) the school nurse has developed a plan for possession, self-administration, or possession and self-administration, and general supervision, and has documented the plan in the student's cumulative health record;
 - (iv) the school nurse has assessed the student's competency for self-administration and deemed it safe and appropriate, including that the student: is capable of identifying and selecting the appropriate medication by size, color, amount or other label identification; knows the frequency and time of day for which the medication is ordered; can identify the presenting symptoms that require medication; administers the medication appropriately; maintains safe control of the medication at all times; seeks adult supervision whenever

warranted; and cooperates with the established medication plan;

- (v) the principal, appropriate teachers, coaches and other appropriate school personnel are informed the student is possessing, self-administering, or possessing and self-administering prescribed medication;
 - (vi) such medication is transported to school and maintained under the student's control in accordance with this policy; and
 - (vii) controlled drugs, as defined in this policy, may not be possessed or self-administered by students, except in extraordinary situations, such as international field trips, with approval of the school nurse supervisor and the school medical advisor in advance and development of an appropriate plan.
- (c) a student diagnosed with asthma who is able to self-administer medication shall be permitted to retain possession of an asthmatic inhaler at all times while attending school, in order to provide for prompt treatment to protect such child against serious harm or death, provided all of the following conditions are met:
- (i) an authorized prescriber provides a written order requiring the possession of an inhaler by the student at all times in order to provide for prompt treatment in order to protect the child against serious harm or death and authorizing the student's self-administration of medication, and such written order is provided to the school nurse;
 - (ii) there is a written authorization from the student's parent or guardian regarding the possession of an inhaler by the student at all times in order to protect the child against serious harm or death and authorizing the student's self-administration of medication, and such written authorization is provided to the school nurse;
 - (iii) the conditions set forth in subsection (b) above have been met, except that the school nurse's review of a student's competency to self-administer an inhaler for asthma in the school setting shall not be used to prevent a student from retaining and self-administering an inhaler for asthma. Students may self-administer medication with only the written authorization of an authorized prescriber and

written authorization from the student's parent or guardian or eligible student; and

- (iv) the conditions for self-administration meet any regulations as may be imposed by the State Board of Education in consultation with the Commissioner of Public Health.
- (d) a student diagnosed with an allergic condition who is able to self-administer medication shall be permitted to retain possession of a cartridge injector at all times while attending school, in order to provide for prompt treatment to protect such child against serious harm or death, provided all of the following conditions are met:
- (i) an authorized prescriber provides a written order requiring the possession of a cartridge injector by the student at all times in order to provide for prompt treatment in order to protect the child against serious harm or death and authorizing the student's possession, self-administration, or possession and self-administration of medication, and such written order is provided to the school nurse;
 - (ii) there is a written authorization from the student's parent or guardian regarding the possession of a cartridge injector by the student at all times in order to protect the child against serious harm or death and authorizing the student's possession, self-administration, or possession and self-administration of medication, and such written authorization is provided to the school nurse;
 - (iii) the conditions set forth in subsection (b) above have been met, except that the school nurse's review of a student's competency to self-administer cartridge injectors for medically-diagnosed allergies in the school setting shall not be used to prevent a student from retaining and self-administering a cartridge injector for medically-diagnosed allergies. Students may self-administer medication with only the written authorization of an authorized prescriber and written authorization from the student's parent or guardian or eligible student; and
 - (iv) the conditions for self-administration meet any regulations as may be imposed by the State Board of Education in consultation with the Commissioner of Public Health.
- (e) a student 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 the student against serious harm or death, provided the following conditions are met:

- (i) the parent or guardian of the student has provided written authorization for the student to possess, self-administer, or possess and self-administer such medication; and
 - (ii) a qualified medical professional has provided a written order for the possession, self-administration, or possession and self-administration.
- (f) a coach of intramural or interscholastic athletic events or licensed athletic trainer who has been trained in the administration of medication, during intramural or interscholastic athletic events, may administer inhalant medications prescribed to treat respiratory conditions and/or medication administered with a cartridge injector for students with medically diagnosed allergic conditions which may require prompt treatment to protect the student against serious harm or death, provided all of the following conditions are met:
 - (i) the school nurse has determined that a self-administration plan is not viable;
 - (ii) the school nurse has provided to the coach a copy of the authorized prescriber's order and parental permission form;
 - (iii) the parent/guardian has provided the coach or licensed athletic trainer with the medication in accordance with Section K of this policy, and such medication is separate from the medication stored in the school health office for use during the school day; and
 - (iv) the coach or licensed athletic trainer agrees to the administration of emergency medication and implements the emergency care plan, identified in Section H of this policy, when appropriate.
- (g) an identified school paraprofessional who has been trained in the administration of medication, provided medication is administered only to a specific student in order to protect that student from harm or death due to a medically diagnosed allergic condition, except as provided in Section D below, and the following additional conditions are met:

- (i) there is written authorization from the student's parents/guardian to administer the medication in school;
 - (ii) medication is administered pursuant to the written order of (A) a physician licensed under chapter 370 of the Connecticut General Statutes, (B) an optometrist licensed to practice optometry under chapter 380 of the Connecticut General Statutes, (C) an advanced practice registered nurse licensed to prescribe in accordance with section 20-94a of the Connecticut General Statutes, or (D) a physician assistant licensed to prescribe in accordance with section 20-12d of the Connecticut General Statutes;
 - (iii) medication is administered only with approval by the school nurse and school medical advisor, if any, in conjunction with the school nurse supervisor and under the supervision of the school nurse;
 - (iv) the medication to be administered is limited to medications necessary for prompt treatment of an allergic reaction, including, but not limited to, a cartridge injector; and
 - (v) the paraprofessional shall have received proper training and supervision from the school nurse in accordance with this policy and state regulations.
- (h) a principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by the Board, coach or school paraprofessional, provided medication is antiepileptic medication, including by rectal syringe, administered only to a specific student with a medically diagnosed epileptic condition that requires prompt treatment in accordance with the student's individual seizure action plan, and the following additional conditions are met:
- (i) there is written authorization from the student's parents/guardians to administer the medication;
 - (ii) a written order for such administration has been received from the student's physician licensed under Chapter 370 of the Connecticut General Statutes;
 - (iii) the principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by the Board, coach or school paraprofessional is selected by the school

nurse and school medical advisor, if any, and voluntarily agrees to administer the medication;

- (iv) the principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by the Board, coach or school paraprofessional annually completes the training program established by the Connecticut State Department of Education and the Association of School Nurses of Connecticut, and the school nurse and medical advisor, if any, have attested, in writing, that such training has been completed; and
 - (v) the principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by the Board, coach or school paraprofessional receives monthly reviews by the school nurse to confirm competency to administer antiepileptic medication.
- (i) a director of a school readiness program or a before or after school program, or the director's designee, provided that the medication is administered:
- (i) only to a child enrolled in such program; and
 - (ii) in accordance with Section L of this policy.
- (j) a licensed practical nurse, after the school nurse has established the medication plan, provided that the licensed practical nurse may not train or delegate the administration of medication to another individual, and provided that the licensed practical nurse can demonstrate one of the following:
- (i) training in administration of medications as part of their basic nursing program;
 - (ii) successful completion of a pharmacology course and subsequent supervised experience; or
 - (iii) supervised experience in the administration of medication while employed in a health care facility.
- (4) Medications may also be administered by a parent or guardian to his/her own child on school grounds.
- (5) Investigational drugs or research or study medications may be administered only by a licensed nurse. For FDA-approved medications

being administered according to a 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.

C. Diabetic Students

- (1) The _____ Board of Education (the “Board”) permits blood glucose testing by students who have a written order from a physician or an advanced practice registered nurse stating the need and capability of such student to conduct self-testing.
- (2) The Board will not restrict the time or location of blood glucose testing by a student with diabetes on school grounds who has written authorization from a parent or guardian and a written order from a physician or an advanced practice registered nurse stating that such child is capable of conducting self-testing on school grounds.
- (3) In the absence or unavailability of the school nurse, select school employees may administer medication with injectable equipment used to administer glucagon to a student with diabetes that may require prompt treatment in order to protect the student against serious harm or death, under the following conditions:
 - (a) The student’s parent or guardian has provided written authorization;
 - (b) A written order for such administration has been received from the student’s physician licensed under Chapter 370 of the Connecticut General Statutes;
 - (c) The school employee is selected by either the school nurse or principal and is a principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by a school district, coach or school paraprofessional;
 - (d) The school nurse shall provide general supervision to the selected school employee;
 - (e) The selected school employee annually completes any training required by the school nurse and school medical advisor in the administration of medication with injectable equipment used to administer glucagon;
 - (f) The school nurse and school medical advisor have attested in writing that selected school employee completed the required training; and

- (g) The selected school employee voluntarily agrees to serve as one who may administer medication with injectable equipment used to administer glucagon to a student with diabetes that may require prompt treatment in order to protect the student against serious harm or death.

D. Epinephrine for Purposes of Emergency First Aid Without Prior Authorization

- (1) For purposes of this Section D, “regular school hours” means the posted hours during which students are required to be in attendance at the individual school on any given day.
- (2) The school nurse shall maintain epinephrine in cartridge injectors for the purpose of emergency first aid to students who experience allergic reactions and do not have prior written authorization of a parent or guardian or a prior written order of a qualified medical professional for the administration of epinephrine.
 - (a) The school nurse, in consultation with the school nurse supervisor, shall determine the supply of epinephrine in cartridge injectors that shall be available in the individual school.
 - (b) In determining the appropriate supply of epinephrine in cartridge injectors, the nurse may consider, among other things, the number of students regularly in the school building during the regular school day and the size of the physical building.
- (3) The school nurse or school principal shall select principal(s), teacher(s), licensed athletic trainer(s), licensed physical or occupational therapist(s) employed by the Board, coach(es) and/or school paraprofessional(s) to maintain and administer the epinephrine in cartridge injectors for the purpose of emergency first aid as described in Paragraph (2) above, in the absence of the school nurse.
 - (a) More than one individual must be selected by the school nurse or school principal for such maintenance and administration in the absence of the school nurse.
 - (b) The selected personnel, before conducting such administration, must annually complete the training made available by the Department of Education for the administration of epinephrine in cartridge injectors for the purpose of emergency first aid.

- (c) The selected personnel must voluntarily agree to complete the training and administer epinephrine in cartridge injectors for the purpose of emergency first aid.
- (4) Either the school nurse or, in the absence of the school nurse, at least one of the selected and trained personnel as described in Paragraph (3) above shall be on the grounds of each school during regular school hours.
 - (a) The school principal, in consultation with the school nurse supervisor, shall determine the level of nursing services and number of selected and trained personnel necessary to ensure that a nurse or selected and trained personnel is present on the grounds of each school during regular school hours.
 - (b) If the school nurse, or a substitute school nurse, is absent or must leave school grounds during regular school hours, the school nurse, school administrator or designee shall send an email to all staff indicating that the selected and trained personnel identified in Paragraph (3) above shall be responsible for the emergency administration of epinephrine.
- (5) The administration of epinephrine pursuant to this section must be done in accordance with this policy, including but not limited to the requirements for documentation and record keeping, errors in medication, emergency medical procedures, and the handling, storage and disposal of medication, and the Regulations adopted by the Department of Education.
- (6) The parent or guardian of any student may submit, in writing, to the school nurse or school medical advisor, if any, that epinephrine shall not be administered to such student pursuant to this section.
 - (a) The school nurse shall notify selected and trained personnel of the students whose parents or guardians have refused emergency administration of epinephrine.
 - (b) The Board shall annually notify parents or guardians of the need to provide such written notice.
- (7) Following the emergency administration of epinephrine by selected and trained personnel as identified in this section:
 - (a) Such emergency administration shall be reported immediately to:
 - (i) The school nurse or school medical advisor, if any, by the personnel who administered the epinephrine; and

- (ii) The student's parent or guardian, by the school nurse or personnel who administered the epinephrine.
- (b) A medication administration record shall be:
 - (i) Submitted to the school nurse by the personnel who administered the epinephrine as soon as possible, but no later than the next school day; and
 - (ii) filed in or summarized on the student's cumulative health record, in accordance with Section E of this policy.

[Optional insert for boards of education wishing to make Naloxone ("Narcan") available in its schools. Naloxone is a controlled medication that is used as an emergency first aid measure in the event of an opioid overdose. Boards of education are not required to make Naloxone available in its schools. We encourage boards of education considering inclusion of this optional language to consult with legal counsel, so that the relevant legal considerations may be discussed.]

E. Naloxone for Purposes of Emergency First Aid

- (1) *Pursuant to a standing order of the Board's medical advisor and authorization from the Superintendent of Schools, and in accordance with Connecticut law and this policy, a school nurse may maintain naloxone, for the purpose of administering emergency first aid to students who experience a known or suspected opioid overdose.*
 - (a) *The school nurse, in consultation with the Board's medical advisor, shall determine the supply of naloxone that shall be maintained in the individual school.*
 - (b) *The school nurse shall be responsible for the safe storage of naloxone maintained in a school and shall ensure any supply of naloxone maintained is stored in accordance with the manufacturer's instructions.*
 - (c) *The school nurse shall be responsible for maintaining an inventory of naloxone maintained in the school, tracking the date(s) of expiration of the supply of naloxone maintained in a school, and, as appropriate, refreshing the supply of naloxone maintained in the school.*
- (2) *The school nurse, in consultation with the Superintendent and the building principal, shall provide notice to parents and guardians of the Board's policies and procedures regarding the emergency*

administration of naloxone in the event of a known or suspected opioid overdose.

- (3) A school nurse shall be approved to administer naloxone for the purpose of emergency first aid, as described in Paragraph (1) above, in the event of a known or suspected opioid overdose, provided that such nurse has completed appropriate training, as identified by the Board's medical advisor, which shall include training in the identification of opioid abuse and overdose.*
- (3) The administration of naloxone pursuant to this section must be effected in accordance with this policy and procedures regarding the acquisition, maintenance, and administration established by the Superintendent in consultation with the Board's medical advisor.*
- (4) Following the emergency administration of naloxone by a school nurse:*
 - (a) Such emergency administration shall be reported immediately to:*
 - (i) The Board medical advisor; and*
 - (ii) The Superintendent; and*
 - (iii) The student's parent or guardian.*
 - (b) A medication administration record shall be:*
 - (i) Maintained by the school nurse who administered the naloxone as soon as possible, but no later than the next school day; and*
 - (ii) filed in or summarized on the student's cumulative health record, in accordance with Section F of this policy.*

F. Documentation and Record Keeping

- (1) Each school or before-and-after school program and school readiness program where medications are administered shall maintain an individual medication administration record for each student who receives medication during school or program hours. This record shall include the following information:*
 - (a) the name of the student;*
 - (b) the student's state-assigned student identifier (SASID);*
 - (c) the name of the medication;*
 - (d) the dosage of the medication;*

- (e) the route of the administration, (i.e. oral, topical, inhalant, etc.);
 - (f) the frequency of administration;
 - (g) the name of the authorized prescriber;
 - (h) the dates for initiating and terminating the administration of medication, including extended-year programs;
 - (i) the quantity received at school and verification by the adult delivering the medication of the quantity received;
 - (j) the date the medication is to be reordered (if any);
 - (k) any student allergies to food and/or medication(s);
 - (l) the date and time of each administration or omission, including the reason for any omission;
 - (m) the dose or amount of each medication administered;
 - (n) the full written or electronic legal signature of the nurse or other authorized school personnel administering the medication; and
 - (o) 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.
- (2) All records are either to be made in ink and shall not be altered, or recorded electronically in a record that cannot be altered.
 - (3) Written orders of authorized prescribers, written authorizations of parent or guardian, the written parental permission for the exchange of information by the prescriber and school nurse to ensure safe administration of such medication, and the completed medication administration record for each student 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.
 - (4) Authorized prescribers may make verbal orders, including telephone orders, for a *change* in medication order. Such verbal orders may be received only by a school nurse and must be followed by a written order, which may be faxed, and must be received within three (3) school days.
 - (5) Medication administration records will be made available to the Department of Education for review until destroyed pursuant to Section 11-8a and Section 10-212a(b) of the Connecticut General Statutes.
 - (a) The completed medication administration record for non-controlled medications may, at the discretion of the school district, be destroyed in accordance with Section M8 of the Connecticut Record Retention Schedules for Municipalities, so long as it is superseded by a summary on the student health record.

- (b) The completed medication administration record for controlled medications shall be maintained in the same manner as the non-controlled medications. In addition, a separate medication administration record needs to be maintained in the school for three (3) years pursuant to Section 10-212a(b) of the Connecticut General Statutes.
- (6) Documentation of any administration of medication by a coach or licensed athletic trainer shall be completed on forms provided by the school and the following procedures shall be followed:
 - (a) a medication administration record for each student shall be maintained in the athletic offices;
 - (b) administration of a cartridge injector medication shall be reported to the school nurse at the earliest possible time, but no later than the next school day;
 - (c) all instances of medication administration, except for the administration of cartridge injector medication, shall be reported to the school nurse at least monthly, or as frequently as required by the individual student plan; and
 - (d) the administration of medication record must be submitted to the school nurse at the end of each sport season and filed in the student's cumulative health record.

G. Errors In Medication Administration

- (1) Whenever any error in medication administration occurs, the following procedures shall apply:
 - (a) the person making the error in medication administration shall immediately implement the medication emergency procedures in this Policy if necessary;
 - (b) the person making the error in medication administration shall in all cases immediately notify the school nurse, principal, school nurse supervisor, and authorized prescriber. The person making the error, in conjunction with the principal, shall also immediately notify the parent or guardian, advising of the nature of the error and all steps taken or being taken to rectify the error, including contact with the authorized prescriber and/or any other medical action(s); and

- (c) the principal shall notify the Superintendent or the Superintendent's designee.
- (2) The school nurse, along with the person making the error, shall complete a report using the authorized medication error report form. The report shall include any corrective action taken.
- (3) Any error in the administration of medication shall be documented in the student's cumulative health record or, for before-and-after school programs and school readiness programs, in the child's program record.
- (4) These same procedures shall apply to coaches and licensed athletic trainers during intramural and interscholastic events, except that if the school nurse is not available, a report must be submitted by the coach or licensed athletic trainer to the school nurse the next school day.

H. Medication Emergency Procedures

- (1) Whenever a student has a life-threatening reaction to administration of a medication, resolution of the reaction to protect the student's health and safety shall be the foremost priority. The school nurse and the authorized prescriber shall be notified immediately, or as soon as possible in light of any emergency medical care that must be given to the student.
- (2) Emergency medical care to resolve a medication emergency includes but is not limited to the following, as appropriate under the circumstances:
 - (a) use of the 911 emergency response system;
 - (b) application by properly trained and/or certified personnel of appropriate emergency medical care techniques, such as cardio-pulmonary resuscitation;
 - (c) administration of emergency medication in accordance with this policy;
 - (d) contact with a poison control center; and
 - (e) transporting the student to the nearest available emergency medical care facility that is capable of responding to a medication emergency.
- (3) As soon as possible, in light of the circumstances, the principal shall be notified of the medication emergency. The principal shall immediately thereafter contact the Superintendent or the Superintendent's designee, who shall thereafter notify the parent or guardian, advising of the existence and nature of the medication emergency and all steps taken or being taken to resolve the emergency and protect the health and safety of the student, including contact with the authorized prescriber and/or any other medical action(s) that are being or have been taken.

I. Supervision

- (1) The school nurse is responsible for general supervision of administration of medications in the school(s) to which that nurse is assigned.
- (2) The school nurse's duty of general supervision includes, but is not limited to, the following:
 - (a) availability on a regularly scheduled basis to:
 - (i) review orders or changes in orders and communicate these to personnel designated to give medication for appropriate follow-up;
 - (ii) set up a plan and schedule to ensure medications are given properly;
 - (iii) provide training to licensed nursing personnel, full-time principals, full-time teachers, full-time licensed physical or occupational therapists employed by the school district, coaches of intramural and interscholastic athletics, licensed athletic trainers and identified paraprofessionals designated in accordance with Section B(3)(g), above, which training shall pertain to the administration of medications to students, and assess the competency of these individuals to administer medication;
 - (iv) support and assist other licensed nursing personnel, full-time principals, full-time teachers, full-time licensed physical or occupational therapists employed by the school district, coaches of intramural and/or interscholastic athletics, licensed athletic trainers and identified paraprofessionals designated in accordance with Section B(3)(g), above, to prepare for and implement their responsibilities related to the administration of specific medications during school hours and during intramural and interscholastic athletics as provided by this policy;
 - (v) provide appropriate follow-up to ensure the administration of medication plan results in desired student outcomes, including providing proper notification to appropriate employees or contractors regarding the contents of such medical plans; and

- (vi) provide consultation by telephone or other means of telecommunications, which consultation may be provided by an authorized prescriber or other nurse in the absence of the school nurse.
- (b) In addition, the school nurse shall be responsible for:
 - (i) implementing policies and procedures regarding the receipt, storage, and administration of medications;
 - (ii) reviewing, on a periodic basis, all documentation pertaining to the administration of medications for students;
 - (iii) performing observations of the competency of medication administration by full-time principals, full-time teachers, full-time licensed physical or occupational therapists employed by the school district, coaches of intramural and/or interscholastic athletics and licensed athletic trainers in accordance with Section B(3)(f), above, and identified paraprofessionals designated in accordance with Section B(3)(g), above, who have been newly trained to administer medications; and,
 - (iv) conducting periodic reviews, as needed, with licensed nursing personnel, full-time principals, full-time teachers, full-time licensed physical or occupational therapists employed by the school district, coaches of intramural and/or interscholastic athletics and licensed athletic trainers in accordance with Section B(3)(f), above, and identified paraprofessionals designated in accordance with Section B(3)(g), above, regarding the needs of any student receiving medication.

J. Training of School Personnel

- (1) Full-time principals, full-time teachers, full-time licensed physical or occupational therapists employed by the school district, coaches of intramural and/or interscholastic athletics and licensed athletic trainers in accordance with Section B(3)(f), above, and identified paraprofessionals designated in accordance with Section B(3)(g), above, who are designated to administer medications shall at least annually receive training in their safe administration, and only trained full-time principals, full-time teachers, full-time licensed physical or occupational therapists employed by the school district, coaches of intramural and/or interscholastic athletics and licensed athletic trainers in accordance with Section B(3)(f), above,

and identified paraprofessionals designated in accordance with Section B(3)(g), above, shall be allowed to administer medications.

- (2) Training for full-time principals, full-time teachers, full-time licensed physical or occupational therapists employed by the school district, coaches of intramural and/or interscholastic athletics and licensed athletic trainers in accordance with Section B(3)(f), above, and identified paraprofessionals designated in accordance with Section B(3)(g), above, shall include, but is not necessarily limited to, the following:
 - (a) the general principles of safe administration of medication;
 - (b) the procedures for administration of medications, including the safe handling and storage of medications, and the required record-keeping; and
 - (c) specific information related to 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 doses of the medication, and when to implement emergency interventions.
- (3) The principal(s), teacher(s), licensed athletic trainer(s), licensed physical or occupational therapist(s) employed by the Board, coach(es) and/or school paraprofessional(s) who administer epinephrine as emergency first aid, pursuant to Section D above, shall annually complete the training program developed by the Departments of Education and Public Health and training in cardiopulmonary resuscitation and first aid.
- (4) The Board shall maintain documentation of medication administration training as follows:
 - (a) dates of general and student-specific trainings;
 - (b) content of the trainings;
 - (c) individuals who have successfully completed general and student-specific administration of medication training for the current school year; and
 - (d) names and credentials of the nurse or school medical advisor, if any, trainer or trainers.
- (5) Licensed practical nurses may not conduct training in the administration of medication to another individual.

[Local and regional boards of education that employ their own bus drivers should include the following language.

(6) Bus Drivers.

(a) *Not later than June 30, 2019, the Board shall provide training to all of its school bus drivers, which training may be completed using an online module, on topics including, but not limited to, the following:*

- (i) *the identification of the signs and symptoms of anaphylaxis;***
- (ii) *the administration of epinephrine by a cartridge injector;***
- (iii) *the notification of emergency personnel; and***
- (iv) *the reporting of an incident involving a student and a life-threatening allergic reaction.***

(c) *On and after July 1, 2019, the Board shall provide the training described in subsections J(6)(a), above as follows:*

- (i) *In the case of a school bus driver who is employed by the Board, such training shall be provided to such school bus driver following the issuance or renewal of a public passenger endorsement to operate a school bus pursuant to Conn. Gen. Stat. 14-44(a), to such school bus driver; and***
- (ii) *In the case of a school bus driver who is not employed by the Board at the time when such endorsement is issued or renewed to such school bus driver, upon the hiring of such school bus driver by the Board, except the Board is not required to provide such training to any school bus driver who has previously received such training following the most recent issuance or renewal of such endorsement to such school bus driver.]***

K. Handling, Storage and Disposal of Medications

- (1) All medications, except those approved for transporting by students for self-medication, those administered by coaches of intramural or interscholastic athletics or licensed athletic trainers in accordance with Section B(3)(f) above, and epinephrine or naloxone to be used for**

emergency first aid in accordance with Sections D and E above, must be delivered by the parent, guardian, or other responsible adult to the nurse assigned to the student's school or, in the absence of such nurse, the school principal who has been trained in the appropriate administration of medication. Medications administered by coaches of intramural or interscholastic athletics or licensed athletic trainers must be delivered by the parent or guardian directly to the coach or licensed athletic trainer in accordance with Section B(3)(f) above.

- (2) The nurse shall examine on-site any new medication, medication order and the required authorization to administer form, and, except for epinephrine and naloxone to be used as emergency first aid in accordance with Sections D and E above, shall develop a medication administration plan for the student before any medication is given to the student by any school personnel. No medication shall be stored at a school without a current written order from an authorized prescriber.
- (3) The school nurse shall review all medication refills with the medication order and parent authorization prior to the administration of medication, except for epinephrine and naloxone intended for emergency first aid in accordance with Sections D and E above.
- (4) Emergency Medications
 - (a) 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.
 - (b) Emergency medication shall be locked beyond the regular school day or program hours, except as otherwise determined by a student's emergency care plan.
- (5) All medications, except those approved for keeping by students for self-medication, shall be kept in a designated and locked location used exclusively for the storage of medication. Controlled substances shall be stored separately from other drugs and substances in a separate, secure, substantially constructed, locked metal or wood cabinet.
- (6) Access to 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 such authorized persons.

- (7) All medications, prescription and non-prescription, shall be delivered and stored in their original containers and in such a manner that renders them safe and effective.
- (8) 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.
- (9) Medications that must be refrigerated shall be stored in a refrigerator at no less than 36 degrees Fahrenheit and no more than 46 degrees Fahrenheit. The refrigerator must be located in the health office that is maintained for health services with limited access. Non-controlled medications may be stored directly on the refrigerator shelf with no further protection needed. Controlled medication shall be stored in a locked box that is affixed to the refrigerator shelf.
- (10) 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:
 - (a) non-controlled drugs shall be destroyed in the presence of at least one witness;
 - (b) controlled drugs shall be destroyed in pursuant to Section 21a-262-3 of the Regulations of Connecticut State Agencies; and
 - (c) 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 pursuant to Section 10-212a(b) of the Connecticut General Statutes. If no residue is present, notification must be made to the Department of Consumer Protection pursuant to Section 21a-262-3 of the Regulations of Connecticut State Agencies.
- (11) Medications to be administered by coaches of intramural or interscholastic athletic events or licensed athletic trainers shall be stored:
 - (a) in containers for the exclusive use of holding medications;

- (b) in locations that preserve the integrity of the medication;
 - (c) under the general supervision of the coach or licensed athletic trainer trained in the administration of medication; and
 - (d) in a locked secured cabinet when not under the general supervision of the coach or licensed athletic trainer during intramural or interscholastic athletic events.
- (12) In no event shall a school store more than a three (3) month supply of a medication for a student.

L. School Readiness Programs and Before-and-After School Programs

- (1) As determined by the school medical advisor, if any, and school nurse supervisor, the following procedures shall apply to the administration of medication during school readiness programs and before-and-after school programs run by the Board, which are exempt from licensure by the Office of Early Childhood:
- (a) Administration of medication at these programs shall be provided only when it is medically necessary for participants to access the program and maintain their health status while attending the program.
 - (b) Except as provided by Sections D and E above, no medication shall be administered in these programs without:
 - (i) the written order of an authorized prescriber; and
 - (ii) the written authorization of a parent or guardian or an eligible student.
 - (c) A school nurse shall provide consultation to the program director, lead teacher or school administrator who has been trained in the administration of medication regarding the safe administration of medication within these programs. The school medical advisor and school nurse supervisor shall determine whether, based on the population of the school readiness program and/or before-and-after school program, additional nursing services are required for these programs.
 - (d) Only school nurses, directors or directors' designees, lead teachers or school administrators who have been properly trained may administer medications to students as delegated by the school nurse or other registered nurse. Properly trained directors or

directors' designees, lead teachers or school administrators may administer oral, topical, intranasal or inhalant medications. Investigational drugs or research or study medications may not be administered in these programs.

- (e) Students attending these programs may be permitted to self-medicate only in accordance with the provisions of Section B(3) of this policy. In such a case, the school nurse must provide the program director, lead teacher or school administrator running the program with the medication order and parent permission for self-administration.
 - (f) In the absence of the school nurse during program administration, the program director, lead teacher or school administrator is responsible for decision-making regarding medication administration.
 - (g) Cartridge injector medications may be administered by a director, lead teacher or school administrator only to a student with a medically-diagnosed allergic condition which may require prompt treatment to protect the student against serious harm or death.
- (2) Local poison control center information shall be readily available at these programs.
 - (3) Procedures for medication emergencies or medication errors, as outlined in this policy, must be followed, except that in the event of a medication error a report must be submitted by the program director, lead teacher or school administrator to the school nurse the next school day.
 - (4) Training for directors or directors' designees, lead teachers or school administrators in the administration of medication shall be provided in accordance with Section J of this policy.
 - (5) All medications must be handled and stored in accordance with Section K of this policy. Where possible, a separate supply of medication shall be stored at the site of the before-and-after 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.
 - (6) Documentation of any administration of medication shall be completed on forms provided by the school and the following procedures shall be followed:

- (a) a medication administration record for each student shall be maintained by the program;
 - (b) administration of a cartridge injector medication shall be reported to the school nurse at the earliest possible time, but no later than the next school day;
 - (c) all instances of medication administration, except for the administration of cartridge injector medication, shall be reported to the school nurse at least monthly, or as frequently as required by the individual student plan; and
 - (d) the administration of medication record must be submitted to the school nurse at the end of each school year and filed in the student's cumulative health record.
- (7) The procedures for the administration of medication at school readiness programs and before-and-after school programs shall be reviewed annually by the school medical advisor, if any, and school nurse supervisor.

M. Review and Revision of Policy

In accordance with the provisions of Conn. Gen. Stat. Section 10-212a(a)(2), the Board shall review this policy periodically, and at least biennially, with the advice and approval of the school medical advisor, if any, or other qualified licensed physician, and the school nurse supervisor. Any proposed revisions to the policy must be made with the advice and approval of the school medical advisor, school nurse supervisor or other qualified licensed physician.

Legal References:

Connecticut General Statutes:

Section 10-206
 Section 10-212
 Section 10-212a
 Section 10-220j
 Section 19a-900
 Section 21a-240
 Section 52-557b

Public Act 18-185, "An Act Concerning the Recommendations of the Task Force on Life-Threatening Food Allergies in Schools"

Regulations of Conn. State Agencies:

Sections 10-212a-1 through 10-212a-10, inclusive

Memorandum of Decision, In Re: Declaratory Ruling/Delegation by Licensed Nurses to
Unlicensed Assistive Personnel, Connecticut State Board of Examiners for
Nursing (April 5, 1995)

ADOPTED: _____

REVISED: _____

07/31/18

[Board of Education/School Letterhead]
REFUSAL TO PERMIT ADMINISTRATION
OF EPINEPHRINE FOR EMERGENCY FIRST AID

238944v32

Regional School District 4 Only

Distance Education

Policy for
Virtual/Online Courses

The Regional School District 4 Board of Education provides a comprehensive educational program to the students of Chester, Deep River, and Essex. The Board believes that enrollment in virtual/online courses provide enrichment opportunities for the students of John Winthrop Middle School and Valley Regional High School when taken as a part of a comprehensive educational program. Virtual/online courses increase instructional flexibility while enhancing opportunities for academic rigor through Internet or Web-based methods. In addition, virtual/online courses may extend the curriculum by allowing students to take courses not currently offered or unique courses of special educational interest.

Students enrolled at John Winthrop Middle School or Valley Regional High School shall be allowed to enroll in virtual/online courses as part of a pre-approved educational program. In addition to regular classroom-based instruction, high school students may earn credit toward graduation through virtual/online courses. Approved virtual/online courses must be consistent with the mission of the district and aligned with academic standards.

1. Virtual High School

The Regional School District 4 Board of Education belongs to a Virtual High School consortium. Students, with the endorsement of their parent/guardian, may enroll in online courses through the Virtual High School consortium to augment and expand their educational program within John Winthrop Middle School and Valley Regional High School, so long as this program is available.

2. Other Institutions

Students, with the endorsement of their parent/guardian, may elect to enroll in virtual/online courses from institutions other than the Virtual High School consortium. This virtual/online course delivery must be from institutions accredited by the New England Association of Schools and Colleges, Southern Association of Colleges and Schools, Middle States Association of Colleges and Schools, North Central Association of Colleges and Schools, Northwest Association of Schools and Colleges, or Western Association of Schools and Colleges.

3. Procedures

The following procedures shall be followed for students to enroll in virtual/online courses, whether through Virtual High School or other institutions, as part of the school's educational program.

- A. Request - The student, parent/guardian, and/or faculty member shall provide at least twenty (20) school days advance written notice to the principal of the request for approval for student enrollment in a virtual/online course. The request shall include:
 - a. A course description, course objectives, performance criteria, the name of the sponsoring institution, and any other pertinent information
 - b. A statement of how the course enhances the students' overall educational program
- B. Review - A committee composed of the principal, school counselor, and the department coordinator in the area related to the specific request shall review the request in a timely manner. The committee shall consider the following:
 - a. Course content, rigor, assessment method, and its connection to the mission of the district
 - b. Student completion of any necessary pre-requisites
 - c. If deemed necessary, name of a Region 4 teacher willing to supervise the student

- d. Student maturation, readiness, and other related factors
- C. Notification - The administration shall notify the parent/guardian in writing of the committee's decision in a timely manner.
 - a. The notification shall be included in the student's record
 - b. If approved, the notification shall include expectations for course completion including student monitoring and expected completion date
- D. Record - The administration shall maintain a record of the completion of virtual/online courses in the student's record.
 - a. The school must receive an official record of the final grade in the virtual/online course
 - b. The final grade in the approved virtual/online course shall be recorded on the transcript of John Winthrop Middle School and Valley Regional High School students
 - c. The final grade in the approved virtual/online course shall be factored into the student's grade point average and class rank up to 7 credits total per year, inclusive of online and VRHS courses. Courses taken beyond 7 credits per year will always be factored at a level 0.

4. Limitations

The Regional School District 4 Board of Education believes enrollment in virtual/online courses, whether through Virtual High School or other institutions, provide enrichment opportunities for students when taken as a part of a comprehensive educational program. However, an important component of a comprehensive educational program includes the opportunity for substantial, personal, and timely interactions between staff and students and among students in academic and co-curricular settings. Therefore, the following limitations shall apply:

- A. John Winthrop Middle School students may enroll in a maximum of ~~three~~ one (31) pre-approved virtual/online classes ~~within the following guidelines:~~
 - a. ~~No more than a total of two (2) courses may be taken in any combination of English, mathematics, science, or social studies~~
 - b. ~~Virtual/online courses may be taken as elective courses~~
- B. Valley Regional High School students may earn a maximum of ~~three~~ two (32) credits by successfully completing pre-approved virtual/online courses within the following guidelines:
 - a. No ~~more than one~~ (1) credit may be applied toward the required credits for graduation in any combination of English, mathematics, science, or social studies
 - b. Credit earned from virtual/online courses may be applied toward graduation requirements as elective credits
 - b.c. Students cannot enroll in a Virtual/Online course that is included in the Valley Regional High School course catalog

Student participation in virtual/online courses requires a high degree of maturity and ethical behavior. It is the expectation that students will demonstrate the maturity and ethical behavior necessary to protect their well-being and maximize their educational growth in any virtual/online course taken pursuant to this policy. The administration may withdraw students from virtual/online courses if they fail to demonstrate the necessary maturity or ethical behavior. In this event, the cost for the virtual/online course may be non-refundable. Furthermore, students enrolled in virtual/online courses must comply with all board policies, school rules, and/or student handbook regulations.

~~The cost for a virtual/online course provided through the Virtual High School consortium shall be borne by the District. The cost for a virtual/online course provided through other institutions shall be borne by the parent/guardian.~~

The cost for a virtual/online course shall be borne by the parent/guardian. All costs must be paid in full before students are registered for virtual/online courses.

The administration shall periodically review student enrollment in virtual/online courses and the consistency of such courses with the mission of the district, instructional goals, and alignment with academic standards.

Virtual/online courses may serve as an option for students placed on extended homebound instruction.

Virtual/online courses may serve as an option for students expelled from the regular school setting, provided educational services are to be continued.

Exceptions to this policy may be made by the Superintendent or designee based on supporting psychological and/or educational evidence.

Legal reference: 10-221 Boards of education to prescribe rules, policies, and procedures.

Policy revised: TBD Regional School District 4 Board of Education

Encl #3 Finance Committee reviewed and recommends there be no revisions to this policy - simply mark as "reviewed" if Policy Committee agrees

3432
3433

Business

Budget & Expense Report/Annual Financial Statement

The Superintendent of Schools shall submit to the Board of Education a monthly report of disbursements and budget balances at the regular meeting each month, and shall submit an annual report covering the preceding school year.

Legal Reference: Connecticut General Statutes

10-222 Appropriations and budget.

Policy adopted:

April 30, 1997

CHESTER PUBLIC SCHOOLS
DEEP RIVER PUBLIC SCHOOLS
ESSEX PUBLIC SCHOOLS
REGIONAL SCHOOL DISTRICT NO. 4

Business

Periodic Audit

An audit of all accounts of the school district shall be provided for the Regional Supervision District Board of Education and the Regional School District No. 4 Board of Education or, in the case of the local district by the municipality in conjunction with the audit of the municipality's accounts and shall be made annually by an independent public accountant selected by the Board of Education on recommendation of the Superintendent and approved by the secretary of the Office of Policy and Management.

The audit shall include all funds of the district, including the student body and cafeteria funds and accounts, and any other funds under the control or jurisdiction of the Board of Education, or pursuant to a joint powers agreement. The audit shall identify all expenditures by source of funds, and shall contain (1) a statement that the audit was conducted pursuant to standards and procedures approved by the State of Connecticut and (2) a summary of audit exceptions and management recommendations.

The annual audit shall be placed on the agenda of the Board of Education at a regularly scheduled public meeting and shall be reviewed by the Board of Education.

Legal Reference: Connecticut General Statutes

7-392 Making of Audits.

7-393 Working papers of accountant; preservation for inspection.

10-260a Auditing of state grants for public education.

Policy adopted:

April 30, 1997

CHESTER PUBLIC SCHOOLS
DEEP RIVER PUBLIC SCHOOLS
ESSEX PUBLIC SCHOOLS
REGIONAL SCHOOL DISTRICT NO. 4

Encl #5 The Finance Committee has reviewed this policy and recommends the following red-lined revisions

3453

Business and Non-Instructional Operations Student Activity Funds

One student activity account/fund shall be maintained for each school. These accounts will be maintained in accordance with Section 10-237 of the Connecticut General Statutes. Each school's student activity account/fund will be ~~managed/administered in the Board of Education central office.~~ **administered at the individual school and reviewed/audited monthly by the Board of Education central office.**

The Principal will be designated as the account Treasurer in accordance with Section 10-237. The regulations governing the collection and dispersion of all funds as well as cash and bank statement reconciliation shall be established by the Business Office as part of the Business Procedures Manual and shall comply with all auditing requirements.

Sub-accounts shall be maintained for each student activity as by the approved Board of Education and a general cumulative account ledger shall also be maintained for handling funds collected in the name of each school. The Business Office shall provide the Boards of Education with mid-year and end-of-year reports.

A class in its final year, or an organization that is disbanding, shall determine at a regularly scheduled or specially called meeting, its preference for the disposition of any funds remaining after all financial obligations have been discharged. Such disposition shall be subject to the review and approval of the administration. In the event that disposition has not been resolved within 90 days of graduation or disbanding, the remaining funds shall be transferred to the general account of the school activity fund.

Gifts, grants, and bequests in cash or checks shall be deposited in the student activity fund and used for the educational benefit of students.

The accounts of the student activity fund shall be considered BOE accounts and audited in the same manner as all other BOE accounts.

Legal Reference: Connecticut General Statutes

10-237 School activity funds

~~Policy revised April 07, 2011~~
Policy Revised TBD

CHESTER PUBLIC SCHOOLS
DEEP RIVER PUBLIC SCHOOLS
ESSEX PUBLIC SCHOOLS
REGIONAL SCHOOL DISTRICT NO. 4

Business

Encl #6 The Finance Committee has reviewed the Policy Committee's revisions to Finance's original recommendations. They recommend keeping the language in red below, instead of deleting it, because it is not covered by the table information – instead it specifies that no one may authorize payments with personal benefit to themselves.

3300

Purchasing Authority

The Boards of Education confer authority and accountability to the as defined below to make expenditures within the amounts and scope of the accounts allocated in the budget that is approved by the Board of Finances and by the Town Meetings.

Delegation of Authority shall be established along the lines of the Board's organizational structure at the highest practical positions. Signing authority is delegated by virtue of appointment to a position. Regardless of any delegation of signing authority made, financial accountability rests with the individual with the original signing authority. Signing officers will not authorize procurements or payments when they are the direct or indirect beneficiaries, or for expenses that may have a personal benefit to them (e.g., travel expense claims). The person of next higher authority must approve such transactions. Signing officers must comply with the intent of this policy. In particular, staff shall not circumvent the established limits by subdividing payment, invoices or contracts into smaller amounts. The operation of these accounts is governed by the policies and standards established by the Boards of Education.

Signing Authority Levels

Position	Up to \$5,000	Between \$5,001 and \$25,000	Between \$25,001 and \$50,000	Over \$50,000*
School Administrator/Principal	Y			
Business Manager		Y		
Superintendent of Schools			Y	
Board of Education				Y

**all capital expenditures regardless of amount.*

Goods and Services Purchasing

All purchases from Town appropriations shall be approved by the Superintendent or his designate in accordance with the established Delegation of Authority.

Expense Reimbursements

The Superintendent is authorized to approve travel and travel expense within budget appropriations, by employees on official business.

Policy adopted:

April 30, 1997

Revised:

TBD (upon approval)

CHESTER PUBLIC SCHOOLS
DEEP RIVER PUBLIC SCHOOLS
ESSEX PUBLIC SCHOOLS
REGIONAL SCHOOL DISTRICT NO. 4

Community Relations

Advertising in Our Schools

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~~It shall be the policy of the Chester, Deep River, Essex and Regional School District No. 4 Boards of Education that neither the facilities, the personnel, nor the children of the schools may be employed in any manner for advertising, distribution of advertising materials, or otherwise promoting the interests of any agency, organization, or company except as described below.~~

~~The Superintendent of Schools may permit distribution of announcements of events held by non-profit community wide social service agencies, governmental agencies, or volunteer community associations and clubs whose major function is the education or recreation of children.~~

~~School publications may accept and publish paid advertising of an acceptable nature upon approval of the principal.~~

The Chester, Deep River, Essex and Regional School District No. 4 Boards of Education believe that properly regulated opportunities for advertising and promotion can create a positive partnership between the school system and the community. The Boards also recognize its responsibility to protect its students from exploitation by private interests and to uphold the values of the school system and the community.

1. Advertising in School Facilities or on District Property

- a. The Superintendent shall administer the use of advertising and promotion at school facilities (which includes both buildings and grounds) in accordance with the conditions proscribed in this procedure and the associated Board of Education policy. All requests not covered by this procedure will be handled individually upon request to the Superintendent of schools.
- b. Designated school facilities shall be available for advertising and promotion, providing such services will not in any way interfere with the use of the school. The District reserves the right to determine the form and or style of advertising allowable.
- c. The practice is to approve advertising on designated school facilities on a first come, first serve basis in accordance with the preferences outlined in the Board of Education policy 1325. Where applicable, preference will be given to non-profit groups over for-profit groups.
- d. No group shall advertise on school facilities unless it agrees to abide by the Board of Education policies and regulations.
- e. Permission shall not be granted for the purpose of giving sectarian instruction or the dissemination of religious doctrine during the school day.
- f. Any group wishing to advertise at any Board of Education facility must complete and meet all Advertising and promotion Application requirements.

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2. Rules for Advertising on Facilities

- a. The Superintendent or designee must approve advertising in District facilities or on District property. Any approval must state precisely where the advertising is to be located and for what period of time.
- b. Advertising, for the purposes of this policy, is defined as the promotion of products and services in exchange for money, service, material or compensation.
- c. Advertising shall not:
 - 1. Violate or contradict the standards, values or educational goals of the District or community as determined by the Board of Education;
 - 2. Promote hostility, disorder or violence;
 - 3. Promote guns, drugs, alcohol or tobacco;
 - 4. Promote, attack or defame any ethnic, racial or religious group;
 - 5. Discriminate, demean, or harass any person or group based on gender or sexual orientation;
 - 6. Inhibit the functioning of the District;
 - 7. Override the school or District identity as defined by the Board of Education;
 - 8. Involve any political promotion or endorsement;
 - 9. Be obscene or violate prevailing community standards;
 - 10. Use any District or school logo without prior approval.
- d. The group or person(s) granted permission to advertise on District property shall pay in a timely manner the amount billed to them by the Board of Education for all services, fees and custodial compensation. Failure of the group to do so will result in a loss of advertising privileges. At the discretion of the Superintendent, all or part of anticipated fees may be required to be paid in advance.

3. Fees For Advertising in School Facilities or on District Grounds

- a. Fees charged for advertising on District property shall be determined each year and posted in appropriate documents and electronic web pages on/or before August 1 for the next school year.
- b. Fees for promotion of school or Town activities may be waived by the Superintendent of Schools.

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4. Funds Management and Allocation

- a. The Board of Education has the responsibility to allocate advertising revenue to support District programs and services. The Board of Education directs the Superintendent of Schools to establish annual program priorities that will be supported by advertising revenue. In determining such priorities the District must ensure that all federal laws regarding the equitable distribution of resources be followed (i.e., Title IX).
- b. The Superintendent shall establish a representative committee to determine the most appropriate use of advertising revenue each year.
- c. All advertising revenues must be accounted for and reported to the Board of Education. All District programs must report advertising revenue to the Superintendent of Schools. The Superintendent shall submit an annual report to the Board of Education regarding the income and expenditures of all District and school advertising revenue.
- d. A portion of each year's revenue will be placed in a fund reserved for xxx.

5. Approval of Advertising

- a. All proposals for advertising shall be submitted to the Superintendent of Schools on the appropriate form.
- b. All advertising must be approved by the Superintendent of Schools or designee prior to placement on school or District property. The Superintendent may refer any proposal to the Board of Education.

Disclaimer

The approval and sale of advertising by the District does not constitute endorsement of any product company or organization.

(cf. 1260 – Educational Foundations)
 (cf. 1314 – Soliciting Funds from and by School Personnel)
 (cf. 1324 – Soliciting Funds from and by Students)
 (cf. 1660 – School-Business Partnerships)
 (cf. 3280 – Gifts Grants and Bequests)
 (cf. 3281.1 – Business/Industry/Corporate Involvement in Education) (cf. 7551 – Naming of Facilities)

Legal Reference: Connecticut General Statutes
 7-194 Powers.
 10-9 Bequests for educational purposes.
 10-21a Accredited courses offered by employers.
 10-21b Programs offered jointly by boards of education and business firms; neighborhood assistance.
 Title IX of the Educational Amendments of 1972.

Policy Adopted: April 30, 2002
Policy Revised: TBD

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