

YORK SCHOOL COMMITTEE MEETING

Wednesday, January 19, 2022

7:00 p.m.

York Public Library

(Masks Required)

Agenda

- A. Call to Order
- B. Pledge of Allegiance
- C. Recognitions
- D. Approval of January 5, 2021 School Committee Meeting Minutes
- E. Communications
 - 1. School Committee
 - a. Upcoming Meetings/Events:
 - January 18 Budget Committee Meeting 6 p.m. @York Public Library
 - January 25 Budget Committee Meeting 6 p.m. @ York Public Library
 - January 26 SCCC Meeting 6 p.m. @ York Public Library
 - January 27 Budget Committee Public Hearing
 - February 2 School Committee Meeting 7 p.m. @ York Public Library
 - 2. Superintendent's Report
 - a. Acceptance of Donations
 - b. Superintendent's Update of School Operation During COVID-19
 - 3. Director of Curriculum, Instruction and Assessment
 - a. Curriculum Audit RFP update
 - b. NEASC accreditation process update
- F. Comments From the Public
- G. New Business
 - 1. Vote on Superintendent's Recommendation
 - 2. Consent Agenda
 - 3. Challenged material decision appeal as per school committee policy [IJJ](#) (Instructional and Library Materials Selection)
 - 4. First Read policies: **GBO** (Family Care Leave); **GBGB** (Workplace Bullying); **JHB**(Truancy); **JLF** (Child Abuse Reporting, Prevention and Education); **JLCB** (Immunization of students); **JLCD** (Administration of Medications to Students)

H. Administrators' Reports:

1. Business Administrator Report:
 - a. Approval of Bills and Payrolls

I. Old and Unfinished Business:

1. Second read policies: **BCB** (Conflict of Interest); **BCC** (Nepotism); **GBN** (Family and Medical Leave)

J. Adjournment

NEPN/NSBA Code: BEDH

PUBLIC PARTICIPATION AT SCHOOL COMMITTEE MEETINGS

School Committee meetings are conducted for the purpose of carrying on the official business of the school system. All regular, special and emergency meetings of the School Committee are open to the public. The public is cordially invited to attend and participate in School Committee meetings as provided in this policy. This policy applies only to meetings of the full Committee, not to meetings of Committee subcommittees.

Although School Committee meetings are not public forums, the School Committee will provide appropriate opportunities for citizens to express opinions and concerns related to matters concerning education and the York School Department schools. The intent is to allow a fair and adequate opportunity for the public to be heard and to provide adequate time for the School Committee to obtain information and opinion on subjects before it, while ensuring that the time allowed for public discussion does not interfere with the fulfillment of the scheduled agenda.

The Committee will designate a portion of its agenda as an opportunity for public participation. During the time allotted for public participation, members of the public may speak on any subject directly related to the operations of the schools, except for personal matters or complaints concerning specific employees or students, which shall be addressed through established policies and procedures.

Members of the public may address the School Committee within the guidelines provided in this policy. The Chair shall be responsible for maintaining proper order and compliance with these guidelines.

The following guidelines shall apply to public participation at School Committee meetings.

A. York citizens and employees of the York School Department are welcome to participate as provided in this policy. Others may be recognized to speak at the Chair's discretion. Individual employees and/or employee groups will not be permitted to discuss matters for which complaint or grievance procedures are provided.

B. The Chair may limit the time allotted for comments on a particular topic as well as the time each individual may speak.

C. In the event of a sizable audience, the Chair may require persons interested in speaking to sign up so they may be called on in a fair and efficient manner.

D. During the time set aside for public participation, the Chair will be responsible for recognizing all speakers, who must identify themselves as they begin talking.

E. Speakers are not permitted to share gossip, make defamatory comments, or use abusive or vulgar language.

F. All speakers are to address the Chair and direct questions or comments to particular School Committee members or the Superintendent only with approval of the Chair. Requests for information or concerns that require further research may be referred to the Superintendent to be addressed at a later time.

G. Members of the School Committee and the Superintendent may ask questions of any person who addresses the School Committee but are expected to refrain from arguing or debating issues. Questions must be addressed through the Chair.

H. No complaints or allegations will be allowed at School Committee meetings concerning any person employed by the school system or against particular students. Personal matters or complaints concerning student or staff issues will not be considered in a public meeting but will be referred through established policies and procedures.

I. In order to make efficient use of meeting time, the School Committee discourages duplication or repetition of comments to the School Committee. The School Committee requests that groups or organizations be represented by designated spokespersons.

J. The Chair has the authority to stop any presentation that violates these guidelines or the privacy rights of others.

K. Persons who disrupt the meeting may be asked to leave, and the Chair may request law enforcement assistance as necessary to restore order.

An agenda shall be published in advance of each meeting in accordance with School Committee policy. Copies will be posted and/or available prior to regular meetings, at the Superintendent's Office and on the York School Department website. Anyone desiring additional information about an agenda item should direct such inquiries to the Office of the Superintendent.

Legal Reference: 1 MRSA § 401 et seq.
20-A MRSA §1001, sub-§20

Cross Reference: [BEC – Executive Session](#)
[BEDA – Notification of School Committee Meetings](#)
[BEDB – School Committee Meeting Agenda](#)
[BEDD – Rules of Order](#)
[KE – General Communications and/or Concerns](#)

First Reading: 3/4/2020
Second Reading: 5/6/2020
Adopted: 5/6/2020

FAMILY CARE LEAVE

This policy governs employee leave under 26 M.R.S.A. Sec. 636, 'An Act to Care for Families', referred to in this policy as the 'Family Care Act.' Leave under this policy is referred to as 'Family Care Leave.'

The Committee recognizes that under Maine's 'Family Care Act,' if an employer provides paid leave under the terms of a collective bargaining agreement or employment policy, the employer must allow an employee to use the paid leave for the care of an immediate family member who is ill.

In law and for the purpose of this policy, the following definitions apply:

1. 'Employer' means a public or private employer with 25 or more employees.
2. 'Immediate family member' means an employee's child, spouse/domestic partner or parent.
3. 'Paid leave' means time away from work by an employee for which the employee receives compensation. Paid leave is limited to sick time, vacation time, compensatory time and leave that is provided as an aggregate amount for use at the discretion of the employee for any of these purposes. Paid leave does not include paid short-term or long-term disability, catastrophic leave or similar types of benefits.

Employees may take paid leave as Family Care Leave in accordance with Maine law, per applicable CBA, or per employment agreement, whichever is greater.

An employee is not entitled to use paid leave until that leave has been earned, or awarded by the Sick Bank Committee.

Any employee electing to take Family Care Leave must apply such leave against available paid sick leave and if sick leave is exhausted, against vacation time (if applicable) then against personal days until all paid leave available has been exhausted, except as otherwise provided in applicable collective bargaining agreements.

Notice/verification of illness for Family Care Leave shall be the same as that required for the employee's own illness. The employee must specify that leave is being taken pursuant to the Family Care Act.

APPLICATION OF FAMILY MEDICAL LEAVE REQUIREMENTS

For purposes of applying family medical leave requirements (i.e., FMLA), the York School Department shall treat leave under the Family Care Act in the same manner as the employer treats leave for an employee illness. Therefore, Family Care Leave and FMLA leave shall run concurrently.

Legal Reference: 26 M.R.S.A. Sec. 636

First Reading: 10/2/19

Second Reading: 10/16/19

Adoption: 10/16/19

TRUANCY

I. TRUANCY DEFINED

A student is truant if the student is required to attend school or alternative instruction under Maine compulsory attendance law and:

- A. Has completed grade 6 and has the equivalent of 10 full days of unexcused absences or 7 consecutive school days of unexcused absences during a school year; or
- B. Is at least 6 years of age and has not completed grade 6 and has the equivalent of 7 full days of unexcused absences or 5 consecutive school days of unexcused absences during a school year.
- C. Is a child 5 years of age or older and under 6 years of age who is enrolled in, has not withdrawn from a public day school, and is required to attend that school during the time it is in session. Such a child will be considered truant if they have the equivalent of 7 full days of unexcused absences or 5 consecutive school days of unexcused absences during a school year.

II. ATTENDANCE COORDINATORS

In accordance with Maine law, the Superintendent shall appoint one or more attendance coordinators. The duties of the attendance coordinator include, but are not limited to:

- A. Interviewing a student whose attendance is irregular and meeting with the student and the parents to determine the cause of the irregular attendance and filing a written report with the principal;
- B. Filing an annual report with the Superintendent summarizing school year activities, findings and recommendations regarding truants;
- C. Serving as a member of the Dropout Prevention Committee; and
- D. Serving as the liaison between the school and the local law enforcement agency in matters pertaining to student absenteeism under Maine law.

As required by law, the following procedure shall be followed when a student is truant:

- A. The principal, upon determining that a student is truant under Section I, shall notify the Superintendent within five school days of the last unexcused absence.
- B. Within five school days of notification, the Superintendent/designee will refer the student who has been determined to be truant to the school's student attendance coordinator.
- C. The student attendance coordinator will meet to determine the cause of the truancy and assess the impact of the student's absences, as well as any future absences for the student. If it is determined that a negative effect exists, the student attendance coordinator shall develop an intervention plan to address the student's absences and the negative effect of these absences.

An intervention plan may include, but is not limited to:

- 1. Frequent communication between the teacher and the family;
- 2. Changes in the learning environment;
- 3. Mentoring;
- 4. Student counseling;
- 5. Tutoring, including peer tutoring;
- 6. Placement into different classes;
- 7. Evaluation for alternative education programs;
- 8. Attendance contracts;
- 9. Referral to other agencies for family services; and
- 10. Other interventions including but not limited to referral to the attendance coordinator or dropout prevention committee.

- D. The student and their parents/guardians shall be invited to attend any meetings scheduled to discuss the student's truancy and the intervention plan. Failure of the student or the student's parent(s) to appear at scheduled meetings does not preclude school administrators from implementing a plan to address a student's truancy.

- E. If the intervention plan is unable to correct the student's truancy, the Superintendent/designee shall serve or cause to be served upon the parent(s) in-hand or by registered mail a written notice that the student's attendance is required by law. The notice shall:

1. State that the student is required to attend school pursuant to 20-A MRSA §5001-A (the compulsory attendance law);
2. Explain the parent's right to inspect the student's attendance records, attendance coordinator's reports, and principal's reports;
3. Explain that the failure to send the student to school and maintain the student in regular attendance is a civil violation in accordance with 20-A MRSA § 5053-A and will jeopardize the student's status in the grade they are in;
4. State that the Superintendent/designee may notify local law enforcement authorities of a violation of 20-A MRSA § 5053-A and the Department of Health and Human Services (DHHS) of a violation under 20-A MRSA § 5051-A(1)(C); and
5. Outline the intervention plan developed to address the student's truancy and the steps that have been taken to implement that plan.

F. Prior to notifying local law enforcement authorities, the Superintendent/designee shall schedule at least one meeting of the school's attendance coordinator as required by law and paragraph III.C and may invite a local prosecutor.

G. If after three school days after the service of the notice described in Section III.E of this policy the student remains truant and the parent(s) and student refuse to attend the meeting referred to in Section III.F, the Superintendent/designee shall report the facts of the unlawful absence to local law enforcement authorities. Local law enforcement may proceed with enforcement action unless the student is at once placed in an appropriate school or otherwise meets the requirements of the compulsory attendance law.

H. When a student is determined to be truant and in violation of the compulsory attendance law and the school's student attendance coordinator have made a good faith attempt to meet the requirements of Section III.C, the Superintendent shall notify the School Committee of the student's truancy.

IV. ANNUAL REPORT TO COMMISSIONER

The Superintendent shall submit an annual report regarding truancy to the Commissioner

of Education by October 1. The report must identify the number of truant students in the York School Department in the preceding school year; describe YSD's efforts to deal with truancy; account for actions brought to enforce the truancy law, and include any other information on truancy requested by the Commissioner.

Legal Reference: 20-A MRSA §§ 5001-A; 5051-A-5054-A
22 MRSA § 4002

Cross Reference: JEA - Compulsory Student Attendance
JFC - Dropout Prevention – Student Withdrawal from School
JLF - Child Abuse Reporting, Prevention and Education

First Reading: 1/20/2021
Second Reading: 2/3/2021
Third Reading: 3/3/2021
Adopted: 3/3/2021

CHILD ABUSE REPORTING, PREVENTION AND EDUCATION

I. DEFINITIONS

A. **Child abuse or neglect.** Child abuse or neglect is defined by Maine law as “a threat to a child's health or welfare by physical, mental or emotional injury or impairment, sexual abuse or exploitation, deprivation of essential needs or lack of protection from these, or failure to ensure compliance with school attendance requirements under Title 20-A” (specifically when a child who is at least seven years of age and has not completed grade six, has the equivalent of seven full days of unexcused absences or five consecutive school days of unexcused absences during a school year).

B. **Person responsible for the child.** A “person responsible for the child” means a person with responsibility for a child's health or welfare, whether in the child's home or another home or a facility which, as part of its function, provides for the care of the child. It includes the child's parent, guardian or other custodian.

II. EMPLOYEES' DUTY TO REPORT

A. Any employee of the York Schools (hereinafter referred to as the “notifying employee”) who has reason to suspect that a child has been or is likely to be abused or neglected must immediately notify the building administrator.

1. In addition to notifying the building administrator, the employee may also make a report directly to the Department of Human Services (DHHS), and the District Attorney if required (Section III.B provides further information about reporting to DHHS and the District Attorney).

B. If the notifying employee does not receive written confirmation from the building administrator/Superintendent within 24 hours of their notification that a report has been made to DHHS (and the District Attorney if required) as described in Section III.D., the employee shall make an immediate report directly to DHHS and, if the person suspected is not a person responsible for the child, to the District Attorney. In such cases, the employee shall then complete a copy of the Suspected Child Abuse and Neglect Form (see JLF-E), in consultation with the building administrator or Superintendent.

C. If the notifying employee does receive written confirmation from the building administrator/Superintendent within 24 hours of their notification as described in Section III.D. (on the Suspected Child Abuse and Neglect Form (see JLF-E), they shall sign the form as acknowledgement that the report was made and return it to the building administrator/Superintendent.

D. Any volunteer who has reason to suspect that a child has been or is likely to be abused or neglected is also expected to make a report to the building administrator, and may also make a report directly to DHHS, and the District Attorney if required (see Section III.B.).

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NEPN/NSBA Code: JLF

III. ADMINISTRATOR REPORTING AND CONFIRMATION DUTIES

All building administrators and the Superintendent are designated agents to make child abuse and neglect reports.

A. If a building administrator suspects abuse or neglect, or receives such a report from an employee, they shall notify the Superintendent immediately.

B. The Superintendent or building administrator shall then make an immediate report by telephone of suspected abuse or neglect to DHHS. In addition, if the person suspected is not the parent, guardian or other custodian of the child, the Superintendent/building administrator shall also make a verbal report to the District Attorney.

1. The law requires the original notifying employee to make their own report to DHHS, and the District Attorney if required, if they have not received confirmation within 24 hours that a report has been made by the Superintendent or building administrator.

C. The person making the report to DHHS and/or the District Attorney shall complete the Suspected Child Abuse or Neglect Form in consultation with the notifying employee (see JLF-E).

D. The Superintendent or building administrator shall provide a copy of the Suspected Child Abuse or Neglect Form to the notifying employee within 24 hours of the employee's initial report. The notifying employee shall sign the report and return it to the Superintendent or building administrator.

E. The form will be forwarded to DHHS, and to the District Attorney if required. It shall be retained by the York Schools for ten years, along with any other information relevant to the case.

IV. INTERNAL INVESTIGATIONS AND DISCIPLINE

A. **Employees.** If the person suspected of abuse or neglect is an employee, the Superintendent/designee shall investigate and take appropriate action, in accordance with applicable Committee policies, collective bargaining contracts, and federal and state laws.

B. **Students.** If the person suspected of abuse or neglect is a student, and the abuse or neglect occurred on school premises, during a school activity, or is otherwise related to the school, the Superintendent/designee shall investigate and take appropriate action, in accordance with applicable Committee policies and federal and state laws.

C. School officials should attempt to coordinate investigations with DHHS and law enforcement to the extent possible, in light of the school's obligation to protect the safety and security of the school environment. When reasonably possible, any internal interviews of a child who may have been abused or neglected will be conducted by a person who has knowledge of appropriate techniques for interviewing alleged victims of abuse or neglect.

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V. INTERVIEWS OF CHILD AND SCHOOL PERSONNEL

DHHS personnel shall be permitted to meet with and interview the child named in the report when the child is present at school as provided in this section. The building administrator or designee shall:

A. Require the DHHS employee requesting to interview the child to provide identification and written certification that in the Department's judgment, the interview is necessary to carry out its duties;

B. Require the DHHS caseworker to discuss the circumstances of the interview and any relevant information regarding the alleged abuse or neglect with the child's teacher, guidance, school nurse, social worker or building administrator as the caseworker deems is necessary to provide needed emotional support to the child prior to and following the interview;

C. Not place conditions on how the interview is conducted, including, but not necessarily limited to requiring that certain persons be present during the interview; prohibiting certain persons from being present during the interview; and requiring notice to or consent from a parent or guardian;

D. Provide an appropriate, quiet and private place for the interview; and

E. Not disclose any information about DHHS's intention to interview the child except to school officials or the school's attorney who need the information to comply with the interview request.

VI. CONFIDENTIALITY OF INFORMATION AND RECORDS

All records, reports and information concerning alleged cases of child abuse and neglect shall be kept confidential to the extent required by Committee policies and applicable law.

The building administrator/designee is permitted to release a child's school records without prior consent of the parent/guardian to DHHS or law enforcement officials as necessary to protect the health or safety of the child or other individuals.

VII. GOOD FAITH IMMUNITY FROM LIABILITY; RETALIATION PROHIBITED

Any person who in good faith reports, assists DHHS in making the child available for an interview, or participates in the investigation or proceedings of a child protection investigation is immune from any criminal or civil liability for the act of reporting or participating in the investigation or proceeding. Good faith does not include instances when a false report is made and the person knows the report is false.

The York School Department prohibits any retaliation against an employee who makes a good faith report of child abuse and neglect in accordance with this policy.

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NEPN/NSBA Code: JLF

VIII. CHILD ABUSE AWARENESS AND PREVENTION TRAINING FOR SCHOOL EMPLOYEES

A. All school employees shall receive a one-hour training on child abuse/neglect and reporting procedures every four years as required by law.

B. The training for employees shall be delivered by a qualified instructor(s) and be “evidence-informed.”

C. The training is intended to

1. Increase awareness of developmentally appropriate and inappropriate sexual behaviors in children;
2. Increase ability to identify indicators of sexual abuse, including physical and psychosocial indicators on a spectrum (including lower to higher probability);
3. Increase ability to effectively respond to sexual behavior or disclosures or suspicions of child sexual abuse; and
4. Include local child sexual abuse and sexual assault resources.

IX. CHILD SEXUAL ABUSE PREVENTION EDUCATION FOR STUDENTS

Students in public pre-school through grade five will receive child sexual abuse prevention education curriculum programs delivered by qualified instructors as part of the health education curriculum aligned with the Learning Results Health Education Standards and follow an appropriate scope and sequence. The curriculum will be consistent with evidence-informed, age-appropriate child sexual abuse prevention education for students, and:

A. Provide age-appropriate education regarding physical and personal boundaries, including biologically accurate body terminology;

B. Help children identify unsafe or uncomfortable situations including a range of feelings, touches or violations of physical boundaries;

C. Help children identify safe adults with whom they could discuss unsafe or uncomfortable situations; and

D. Help children identify and develop skills to support a friend who may be experiencing unsafe or uncomfortable situations.

Legal Reference: 22 MRSA Ch. 1071, Child and Family Services and Child Protection Act

20 USC Sec. 1232g, Family Educational Rights and Privacy Act

Cross Reference: ACAA - Harassment and Sexual Harassment of Students

GBEB - Staff Conduct with Students

JLF-E - Suspected Child Abuse and Neglect Form

JRA - Student Records

First Reading: 11/7/18

Second Reading: 11/21/18
Third Reading: 12/5/18
Adopted: 12/5/18

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IMMUNIZATION OF STUDENTS

Immunization Requirements

- I. All students who enroll in the York School Department (YSD) are required by Maine law to present a certificate of immunization or evidence of immunization or immunity against poliomyelitis; diphtheria, pertussis (whooping cough), tetanus; measles, mumps, rubella; and varicella (chicken pox).
- II. One dose of Tetanus/Diphtheria/Pertussis (Tdap) is required for students entering 7th grade.
- III. Immunization against meningococcal disease is required as follows:
 - A. One dose of meningococcal vaccine MCV4 is required for students entering 7th grade.
 - B. Students entering 12th grade are required to have received two doses of MCV4. The first dose shall have been received on or after the 11th birthday, and the second dose shall have been received on or after the 16th birthday, at least eight weeks after the first dose. Only one dose is required if the first dose is administered when the student is 16 years of age or older.

Students Who Are Not Immunized

Non-immunized students shall not be permitted to attend school or school activities, unless one of the following conditions is met:

- I. The parents/guardians provide to the school written assurance that the child will be immunized within 90 days of enrolling in school or their first attendance in classes, whichever date is earlier. This option is available only once to each student during their school career and may not be granted a second time to a child transferring from one school to another. However, a period of twenty-one (21) calendar days may be granted to allow for the transfer of health records from one school to another.; or
- II. The parent/guardian provide a written statement each year from a licensed physician, nurse practitioner or physician assistant that, in their professional judgement,

immunization against one or more diseases may be medically inadvisable (as defined by law/regulation); or

III. The parents/guardians state in writing each year that immunization is contrary to their sincere religious belief or for philosophical reasons. Effective September 1, 2021, exemption based on religious or philosophical beliefs is no longer available. A student covered by an IEP who elected a religious or philosophical exemption prior to September 1, 2021 may continue to attend school under the existing exemption so long as the parent/guardian or the student, if 18 years of age or older, provides a statement from a licensed physician, nurse practitioner or physician assistant that the provider has consulted with the parent/guardian or student and has made the parent/guardian or student aware of the risks and benefits associated with the choice to immunize.

Exclusion of Students from School

I. The Superintendent shall exclude from school any non-immunized student when there is a clear danger to the health of others as provided by law.

II. Arrangements shall be made for students who are excluded from school for more than ten days to receive and complete school assignments if possible, and to make up missed examinations and other work within a reasonable time upon their return to school.

III. The Superintendent/designee is directed to develop such administrative procedures as are necessary to carry out this policy and comply with statutory requirements.

Legal Reference: 20-A MRSA §§ 6352-6359
Me. Dept. of Ed. Rule Chapter 126 (May 10, 2018)

Cross Reference: JLCC - Communicable/Infectious Diseases
JRA - Student Educational Records

First Reading: 5/20/2020
Second Reading: 6/3/2020
Adopted: 6/3/2020

ADMINISTRATION OF MEDICATION TO STUDENTS

Although the School Committee discourages the administration of medication to students during the school day when other options exist, it recognizes that in some instances a student's chronic or short-term illness, injury, or disabling condition may require the administration of medication during the school day. The school will not deny educational opportunities to students requiring the administration of medication in order to remain in attendance and participate in the educational program.

The intent of this policy is to promote the safe administration of medications to students by school personnel and to provide for authorization of student self-administration of medication from asthma inhalers and epinephrine auto-injectors, self-administration of medications related to the care of insulin-dependent diabetes, and possession and self-administration of sunscreen. The Committee encourages collaboration between parents/guardians and the schools in these efforts.

This policy does not apply to medical marijuana, which is addressed in the Committee's policy JLCDA, Medical Marijuana in Schools.

The Committee disclaims any and all responsibility for the diagnosis, prescription of treatment, and administration of medication for any student, and for any injury arising from a student's self-administration of medication.

I. DEFINITIONS

Administration: the provision of prescribed medication to a student according to the orders of a health care provider

Allergen: a substance that can cause an allergic reaction

Anaphylaxis: a severe, whole-body allergic reaction to a chemical that has become an allergen

Asthma inhaler: a device for the delivery of prescribed asthma medication which is inhaled. It includes metered dose inhalers, dry powder inhalers and nebulizers

Health care provider: a medical/health practitioner who has a current license with a scope of practice that includes prescribing medication.

Indirect supervision: the supervision of an unlicensed school staff member when the school nurse or other health care provider is not physically available on site but immediately available by telephone.

Medication: prescribed drugs and medical devices that are controlled by the U.S. Food and Drug Administration and ordered by a health care provider. It includes over-the-counter medications prescribed through a standing order by the school health advisor or prescribed by the student's health care provider. For the purpose of this policy, "medication" does not include medical marijuana.

Medication Error: an error which occurs when a medication is not administered as prescribed. This includes when the medication prescribed is not given to the correct student, at the correct time, in the dosage prescribed, by the correct route, or when the medication administered is not the correct medication.

Parent: a natural or adoptive parent, a guardian, or a person acting as a parent of a child with legal responsibility for the child's welfare.

School Health Advisor: a physician or family or pediatric nurse practitioner per §6402-A.

School Nurse: a registered professional nurse with Maine Department of Education certification for school nursing.

Self-Administration: administration of medication by a student independently to themselves under indirect supervision of the school nurse.

Sunscreen: Sunscreen means any product regulated by the FDA as an over-the-counter product designed to protect the skin from harmful UVA/UVB rays from the sun. For the purpose of use in the school setting, allowable products include oils, lotions, creams, gels, butters, pastes, ointments, and sticks.

Unlicensed school personnel: persons acting on behalf of the school, who do not have a professional license that allows them, within the scope of that license, to administer medication

Training for Unlicensed School Personnel: the organized and systematic education of unlicensed school personnel who will administer medications to students.

II. ADMINISTRATION OF MEDICATION BY SCHOOL PERSONNEL

A. Parental Request

In the event that no reasonable alternative exists, the parent/guardian may request in writing that medication be administered to the student during the school day or a school sponsored event. The written request must include an acknowledgement and agreement that unlicensed personnel may administer the medication as per the health care provider's instructions. In addition, the request shall indicate that information regarding the student's medication may be shared with appropriate school personnel. Parents may provide the reason (diagnosis) requiring the administration of medication. Requests shall be valid for the current school year only.

B. Health Care Provider's Order

1. All parental requests must be accompanied by a written order from the student's health care provider substantiating the fact that the administration of a particular medication during the school day is necessary for the student's health and attendance in school. Such order must include:

- a. The student's name;
- b. The name of the medication;
- c. The dose;
- d. The route of administration (e.g., tablets, liquid, drops); and
- e. Time intervals for administration (e.g., every four hours, before meals);
- f. Any special instructions; and
- g. The name of the prescribing health care provider.

A medication label that provides sufficient information may be used in lieu of a written order unless the medication is to be administered for more than 15 consecutive days.

2. School nurses are responsible for their own actions in the administration of medication. It is the school nurse's responsibility to clarify any medication order that they believe to be inappropriate or ambiguous. The school nurse has the right and responsibility to decline to administer a medication they believe such administration would jeopardize student safety. In this case, the school nurse must notify the parent, the student's health care provider and the school administrator (i.e., building principal or designated administrator).

C. Renewal of Parent Permission Requests/Forms and Health Care Provider Orders

Written parental permission requests/forms and health care provider orders must be renewed at least annually. Health care provider orders must be renewed whenever there are changes in the order.

D. Delivery and Storage of Medication

1. Medication to be administered by school personnel must be delivered to school in its properly labeled, original container. Medication shall be delivered to the school by the student's parents. In the event that parent delivery is not practical, the parent must contact the school to make alternate arrangements.
2. No more than a 20-day (one month) supply of medication shall be kept at school, excluding inhalers and epinephrine autoinjectors. The parent is responsible for the replenishment of medication kept at school.

If the health care provider's order/prescription is for a medication regulated by Schedule II of the Controlled Substances Act (21 USC §812) (e.g., Ritalin and Adderall) no more than a two week supply shall be kept at school.

[NOTE: The paragraph immediately above has been added as an at-tempt to discourage break-ins by individuals hoping to acquire prescription drugs for personal use or further distribution.]

3. The parent is responsible for notifying the school of any changes in or discontinuation of a prescribed medication that is being administered to the

student at school. The parent must remove any medication no longer required or that remains at the end of the school year.

4. The school nurse shall be responsible for developing and implementing procedures for the appropriate and secure storage of medications kept at school, and all medications shall be stored in accordance with this procedure.

E. Recordkeeping

1. School personnel and the student's parent shall account for all medication brought to school. The number of capsules, pills or tablets, and/or the volume of other medications brought to school shall be recorded.
2. School staff administering medication shall document each instance the medication is administered including the date, time, and dosage given.
3. The school nurse shall maintain a record including the parent's request, physician's order, details of the specific medications (including dosage and timing of medication), and documentation of each instance the medication is administered.
4. Records shall be retained according to the current State schedules pertaining to student health records.
5. The Superintendent/designee shall provide an annual report to the Department of Education (DOE) summarizing and analyzing all incident reports involving a severe allergic reaction or the administration of an epinephrine autoinjector.

F. Confidentiality

To the extent legally permissible, staff members may be provided with such information regarding medication and its administration as may be in the best interest of the student.

G. Administration of Medication

1. It is recommended that the first dose of a newly prescribed medication be given at home. The exception will be the use of epinephrine autoinjector for an unknown anaphylaxis, or emergency medication for diabetes such as, but not limited to glucagon.
2. Medication may be administered during the school day by licensed medical personnel acting within the scope of their licenses.
3. The school nurse, under the administrative supervision of the Superintendent, will provide direction and oversight for the administration of medication to students.
4. All unlicensed personnel (principals, teachers, education technicians, school secretaries, coaches, bus drivers, etc.) who administer medication must receive training before being authorized to do so.
5. Based upon the documentation of training and competency in the administration of medication, the school nurse will make recommendations to the Superintendent/designee pertaining to

authorization of unlicensed persons to administer medication. Training that shall be acceptable for the purpose of authorization of unlicensed personnel is addressed under the section of this policy titled 'Required Training of Unlicensed Personnel to Administer Medication.'

H. Administration of Medication During Off-Campus Field Trips and School-Sponsored Events

The school will accommodate students requiring administration of medication during field trips or school-sponsored events as follows:

1. The school nurse, principal, and, as appropriate, the school unit's Section 504 Coordinator and/or IEP will determine whether an individual student's participation is contraindicated due to the unstable/fragile nature of their health condition, the distance from emergency care that may be required, and/or other extraordinary circumstances. The student's parent and primary care provider will be consulted in making this determination. The decision will be made in compliance with applicable laws, including the IDEA § 504 and the Americans with Disabilities Act (ADA).
2. The parent must provide the appropriate number of doses needed for the duration of the field trip or school-sponsored event in duplicate medication containers from the pharmacy.
3. When there are no contraindications to student participation, an appropriately trained staff member will be assigned to administer medication. The parent will be encouraged to accompany the student, if possible, to care for the student and administer medication. Training for administering medication for a field trip only may be an abbreviated version of the Training of Nonlicensed School Personnel in Medication Administration, but is only valid for the specific event.
4. All provisions of this policy shall apply to medications to be administered during off-campus field trips and school-sponsored events. As practicable, the DOE's 'Policy for Medication Administration on School Trips' will be followed.
5. The medication will be transported and stored in compliance with any special directions for the medication and will be secured as safely as possible.
6. The administration of medication on a field trip will duplicate as much as possible, the guidelines found in the Medication Administration Handbook for Unlicensed School Personnel. This will include consideration of student privacy and cleanliness of areas where medications are administered.
7. Medication will be administered to the student to assure that the right student receives the right medication, with the right dose, at the right time, by the right route. The trained personnel administering the medication will double check the student with the medication label and will double check the dose. The medication will be administered within 30 minutes either side of the prescribed time.

8. The Superintendent, in consultation with YSD nursing staff, will develop a method of documenting medications administered on the field trip, recording any unexpected occurrences, and a method of returning any medication not administered.

I. Administration of Medication During Out-of-State Field Trips and School-Sponsored Events

1. YSD must consider other states' laws when administering medications during out-of-state field trips or school-sponsored events. It is advisable that the school nurse contact the Board of Nursing in the state of the school trip regarding questions about unlicensed school personnel administering medications. Some states do not allow unlicensed school personnel to administer medications, for example.
2. If the school nurse is attending the out of state field trip, they should determine if it is part of the Nurse Licensure Compact, which allows a nurse to have one multistate license with the ability to practice in the home state and other compact states. If the state is not a compact state, then the school nurse should contact that state's office that regulates nursing practice.
3. With sufficient advance notice, YSD *may* allow for self-administration of medication by students on overnight trips or in unique situations where there may not be authorized adults to hold/administer medication. Parents must contact the school nurse and building principal in advance to allow for sufficient communication time between the medical provider and school nurse to determine the appropriateness of medication self-administration.

J. Dispensation of Over-the-Counter Medications

With prior written parent permission, students may receive certain over the counter medications at school, e.g., Tylenol, Ibuprofen, Tums, cough drops, etc. pursuant to a standing order from the school physician/school health advisor.

[NOTE: A standing order is an order written by the school physician for the entire population of students.]

K. Required Training of Unlicensed Personnel to Administer Medication

1. Unlicensed school personnel who administer medication to students in a school setting (at school, on school transportation to or from school, on field trips, or during school-sponsored events) must be trained in the administration of medication before being authorized to carry out this responsibility. Such training must be provided by a registered professional nurse or physician and include the components specified in Department of Education Rules Chapter 40 and other applicable Department of Education standards, recommendations, programs, and/or methodologies.
2. The trainer shall document the training and competency of unlicensed school personnel to administer medication. Based upon a review of the documentation of training and competency in the administration of medication, the school nurse will make recommendations to the Superintendent/designee pertaining to authorization of such unlicensed personnel pertaining to authorization to administer medication.
3. Following the initial training, a training review and information update must be held at least

annually for those unlicensed school personnel authorized to administer medication.

4. Training for the purposes of administering medication for a field trip, may be an abbreviated version of the Medication Administration Training Handbook For Unlicensed School Personnel, at the discretion of the school nurse, but is only a valid training for the specific field trip/off-campus event.

III. Student Self-Administration of Asthma Inhalers, and Epinephrine Pens Auto-injectors, or Medications Related to the Care of Insulin Dependent Diabetes

A. Students may possess and self-administer emergency medication of an inhaled asthma medication, an epinephrine auto-injector, or medications related to the care of insulin dependent diabetes, under the following conditions:

1. Written approval is received from the student's health care provider stating that the student has the knowledge and skills to safely possess and use an inhaled asthma medication, or an epinephrine auto-injector, or insulin. The student's primary care provider must specify the name and dosage of the medication, frequency with which it may be administered, and the circumstances that may warrant its use.
2. An Individualized Health Plan and Emergency Plan for is needed for students:
 - a. Prone to anaphylaxis for which epinephrine auto-injectors are prescribed;
 - b. With asthma requiring treatment and management at school;
 - c. With diabetes requiring treatment and management at school.
3. Written approval is received from the parent indicating that their child may carry and self-administer the medication or a written request to carry and self-administer the medication is submitted by the student if age 18 or older .
4. The student demonstrates to the school nurse their ability to properly and responsibly carry and use the inhaled asthma medication, epinephrine auto-injector, or medication related to the care of their insulin dependent diabetes. The school nurse should consider the ability of the student to understand their diagnosis, appreciate the importance of taking their medication at the right time and in the right amount, and accept the responsibility that comes with self carry medications.

B. The school nurse will inform the parent that the school cannot accurately monitor the frequency and appropriateness of use when the student self-administers medication, and that the school unit will not be responsible for any injury arising from the student's self-medication.

C. Authorization granted to a student to possess and self-administer medication from an epinephrine auto-injector or inhaled asthma medication shall be valid for the current school year only and must be renewed annually.

D. A student's authorization to possess and self-administer medication from an epinephrine auto-injector or inhaled asthma medication may be limited or revoked by the building principal after consultation with the school nurse and the student's parents if the student demonstrates inability to responsibly possess and self-administer such medication.

E. To the extent legally permissible, staff members may be provided with such information regarding the student's medication and the student's self-administration as may be in the best interest of the student.

F. Sharing, borrowing, or distribution of medication is prohibited. The student's authorization to self-administer medication may be revoked and the student may be subject to disciplinary consequences for violation of this policy.

IV. Student Possession and Self-administration of Sunscreen

A. Students may possess and self-administer topical sunscreen without a signed order from a health care provider, under the following conditions:

1. Sunscreen is to be in its original container, labeled with directions of use and warnings;
2. Written parental permission to carry and self-administer;
3. Student should inform the school nurse or other superintendent designee that he/she has sunscreen in their possession;
4. School nurse or other designated school staff may inspect sunscreen product for safety and proper FDA labeling.

B. There is no expectation that school staff will apply sunscreen to students.

C. There is no expectation that the school will supply sunscreen to all students.

D. A student who is unable to physically apply sunscreen may be assisted by unlicensed personnel when directed to do so by the student, if permitted by a parent or guardian and authorized by the school.

V. Delegation and Implementation

The Superintendent/designee shall be responsible for developing administrative procedures and/or protocols to implement or supplement this policy.

Such procedures/protocols shall include direction regarding:

- A. Safe transport of medication to and from school;
- B. Administration of medication during field trips and school-sponsored events;
- C. Accountability for medications, particularly those regulated by the Schedule II of the Controlled Substances Act;
- D. Proper storage of medication at school;
- E. Training of appropriate staff on administration of emergency medications including the detailed standards for the signs and symptoms of anaphylaxis and the use of epinephrine autoinjectors for previously unknown severe allergies;
- F. The procedure to follow in the event of a medication reaction;
- G. Access to medications in case of a disaster;
- H. The process for documenting medications given and medication errors; and
- I. The proper disposal of medications not retrieved by parents.
- J. The proper guidelines for stocking and administering epinephrine autoinjectors

Legal Reference: 20-A M.R.S.A. §§ 201; 4009(4);254(5);4502 (5)(N);
6305 (1-9); 6306; 223 §6402-A
Title 22, section 2423-B
Ch. 40 (Me. Dept. of Educ. Rule)

YORK SCHOOL COMMITTEE

DOE Medication Administration Handbook for
Unlicensed School Personnel
21 USC §801 et. seq. (Controlled Substances Act)
28 C.F.R. Part 35 (Americans with Disabilities Act of 1990)
34 C.F.R. Part 104 (Section 504 of the Rehabilitation Act of
1973)
34 C.F.R. Part 300 (Individuals with Disabilities Education
Act)

Cross Reference: [JLCDA](#) Medical Marijuana in Schools

Related Administrative Procedures: JLCD-E Medication Administration on Field Trips

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