

NEW MILFORD BOARD OF EDUCATION

New Milford Public Schools
50 East Street
New Milford, Connecticut 06776
(860) 355-8406

**POLICY SUB-COMMITTEE
MEETING NOTICE**

DATE: May 17, 2011
TIME: 6:30 P.M.
PLACE: Lillis Administration Building, Rm. 2

AGENDA

New Milford Public Schools Mission Statement

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

1. Call to Order

2. Public Comment

The Board welcomes Public Participation and asks that speakers please limit their comments to three minutes. Speakers may offer objective comments of school operations and programs that concern them. The Board will not permit any expression of personal complaints or defamatory comments about Board of Education personnel and students, nor against any person connected with the New Milford Public School System.

3. Discussion and Possible Action Items

A. Recommended for Revision

1. Policy 5141.21 Administration of Medication
2. Policy 5121.2 Eligibility for Honor Rolls
3. Policy 6141.4 Independent Study

4. Items of Information

- A. Regulation 5141.21 Administration of Medication
- B. Regulation 6146.1 Grade Point Average/Grade Weighting/Class Ranking
- C. Regulation 6141.4 Independent Study
- D. Regulation 6172.3 Home Schooling

5. Adjourn

Sub-Committee Members: Mrs. Nancy Tarascio-Latour, Chair
Mrs. Lynette Celli Rigdon
Mr. David A. Lawson
Mrs. Alexandra Thomas

Alternates: Mr. Daniel W. Nichols
Mr. Bill Wellman

GEORGE C. BUCKBEE
TOWN CLERK
2011 MAY 13 A 10:20
NEW MILFORD, CT

<p style="text-align: center;">RECOMMENDED FOR REVISION <i>Bold Italicized</i> language constitutes an addition Stricken language constitutes a deletion</p>

Commentary: By law, the Board of Education is required to determine who shall administer medications in its schools, establish the circumstances under which self-administration of medication by students is permitted and develop policies and procedures concerning the administration of medication. This Board-level policy is intended to establish the basic elements of the administration of medication, leaving the specifics to the regulations, which must be developed with the advice and approval of the school medical advisor and the school nurse supervisor. This policy incorporates the 2010 revisions to the state regulations.

5141.21(a)

Students

Administration of Medication

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

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

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

Definitions

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

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

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

- Handling, storing, preparing or pouring of medication;
- Conveying it to the student according to the medication order;
- Observing the student inhale, apply, swallow, or self-inject the medication;
- Documenting that the medication was administered;
- Counting remaining doses to verify proper administration and use.

“Qualified Personnel for Schools” means principals, teachers, occupational therapists, and physical therapists employed full-time by the Board, coaches, licensed athletic trainers, certain paraprofessionals, as well as directors (or designees), lead teachers and administrators of school readiness programs and before- or after-school programs who have received specialized training in the administration of medication.

Students

Administration of Medication

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

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

Documentation Required

Prior to any administration of medication to students, the school nurse must be in possession of the following documentation:

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

Self-Administration of Medications by Students

~~Students who have a verified chronic medical condition and are deemed capable to self-administer prescribed emergency medication and other medications, excluding controlled drugs, will be permitted to self-administer such medication provided that:~~

~~{Commentary: The state regulations require Boards of Education to permit students to self-administer prescribed emergency medications, but give the Boards discretion to permit students to self-administer non-emergency medications (this includes over the counter drugs), as written in the paragraph above. If the Board prefers to restrict self-administration to only emergency medications, you may do so with this~~ **OPTIONAL ALTERNATIVE LANGUAGE:** ***Students who have a verified chronic medical condition and are deemed capable to self-administer prescribed emergency medication [or maintenance medication for diabetes] will be permitted to self-administer such medication provided that:***

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

Students

Administration of Medication

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

Administrative Regulations

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

1. Administration of medications by qualified personnel for schools
2. Limitations of LPNs, paraprofessionals, coaches and athletic trainers
3. School readiness and before- or after-school programs
4. Training and supervision of qualified school personnel
5. Self-administration of medications by students
6. Procedures in the event of a medication emergency
7. Handling, storage and disposal of medications
8. Documentation and record-keeping
9. Notification and documentation of errors in the administration of medication

Biennial Review of Policy and Regulations

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

Students

Administration of Medication

Legal Reference: Connecticut General Statutes

- 10-212 School nurses and nurse practitioners. Administration of medications by parents or guardians on school grounds.
- 10-212a Administration of medications in schools, at athletic events and to children in school readiness programs

Regulations of Connecticut State Agencies

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

Policy adopted: June 12, 2001
Policy revised: June 11, 2002
Policy revised: August 26, 2003
Policy revised: June 24, 2004
Policy revised: September 14, 2004
Policy revised: June 12, 2007
Policy revised: October 13, 2009
Policy revised:

NEW MILFORD PUBLIC SCHOOLS
New Milford, Connecticut

Recommended for Revision
***Bold Italicized* language constitutes an addition.**
~~Stricken~~ language constitutes a deletion.

5121.2

Students

Eligibility For Honor Rolls

To recognize outstanding scholastic achievement, motivate students to do well in their studies, and teach students the importance of meeting all their responsibilities, the Board of Education hereby establishes the following categories of honors and the criteria for eligibility for said honors.

~~To be eligible for honors a student must receive a grade C or 70 in all subjects including physical education.~~

High School (9-12)

Highest Honors:	All grades 90 or better in all major subjects.
High Honors:	An average of 90 or better in all major subjects. No grade below 70.
Honors:	An average of 85 or better in all major subjects. No grade below 70.

Middle School (7-8)

Highest Honors:	All grades 90 or better in all major subjects.
High Honors:	An overall average of 90 or better in all major subjects. <i>No grade below 70 in minor subjects.</i>
Honors:	An overall average of 85 or better in all major subjects. <i>No grade below 70 in minor subjects.</i>

A *middle school* “major subject” is ~~a course that meets five times a week or in a cycle~~ ***includes English, mathematics, science, social studies, and world language. All other subjects are considered minor subjects.***

~~To achieve honor roll status, a student may not receive a grade below 70 in any minor subject which meets fewer than five days per week.~~

Policy adopted: June 12, 2001
Policy revised: June 11, 2002
Policy revised: June 12, 2007
Policy revised:

NEW MILFORD PUBLIC SCHOOLS
New Milford, Connecticut

Recommended for Revision
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6141.4 (a)

Instruction

Independent Study

To meet the needs of extremely capable and highly motivated students, the Board of Education hereby establishes the following policy with respect to The Independent Study Programs at New Milford High School.

This policy is to provide equity as well as opportunities for all students who need to make up credits and is limited in scope to the following criteria and falls under the discretion of the High School Principal.

1. Independent Study proposals will be presented to the Principal or his/her designee prior to the school year or semester the independent study is to occur. Approval must be obtained from the Principal before the second week of the school year or semester. If a proposal is submitted subsequent to the second week of the semester, the Superintendent may approve the proposal, if the High School Principal can show cause as to why the time frame outlined above should be waived.
2. Independent Study ordinarily will be available only for approved Board of Education Courses. If a student submits a proposal which goes beyond the regular school curriculum, that student must have a record of outstanding responsibility and motivation in their academic pursuits.
3. The proposal must have a faculty sponsor certified in the area most closely associated with the Independent Study proposal. The staff member who guides and lends technical support does so voluntarily and not in lieu of any other assignment.
4. The Independent Study course is classified as an elective. It may not supplant any required high school class/course without first obtaining a waiver from the High School Principal.
5. Independent Study credits must be judged to require equivalent commitment of time and must be certified by the faculty sponsor.
6. An assessment component of the Independent Study proposal must be clearly delineated. A portfolio, performance or exam are acceptable assessment vehicles. The sponsoring staff member will conduct an assessment or review any outside assessment agreed upon as a prior part of the Independent Study proposal. The sponsor must approve the level of work in the project in order for any credit to be awarded.
7. ~~A maximum number of two (2) Independent Study credits may be earned by an individual unless the Board of Education has first granted approval to any plan that calls for an individual to be awarded more than two (2) independent credits in his/her high school career.~~

Instruction

Independent Study

7. *A maximum number of two (2) Independent Study credits may be earned by an individual unless, based upon the unique needs or circumstances of the student, the Superintendent of Schools has first granted approval to any plan that calls for an individual to be awarded more than two (2) independent credits in his/her high school career.*

FOR YOUR INFORMATION

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~~Stricken~~ language constitutes a deletion

5141.21(a)

Students

Administration of Medications

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

I. Administration of Medications by Qualified Personnel for Schools

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

A. General Principles

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

B. Qualified Personnel for Schools includes the following:

1. Principals, teachers, speech and language pathologists, occupational therapists, and physical therapists employed full-time by the Board;
2. Coaches and licensed athletic trainers (subject to the conditions below);
3. Paraprofessionals (subject to the conditions below);

Students

Administration of Medications

I. Administration of Medications by Qualified Personnel for Schools (cont'd.)

4. Directors (or directors' designees), lead teachers and administrators of school readiness programs and before- or after-school programs

C. Basic prerequisites

No medication may be administered to students by any school personnel without documentation of the following in the student's health record:

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

D. Medications that may be administered

1. Qualified personnel for schools may administer oral, topical, intranasal or inhalant medications;
2. Medications with a cartridge injector may be administered by qualified personnel for schools only to a student with a medically-diagnosed allergic condition which may require prompt treatment to protect the student against serious harm or death;
3. Qualified personnel for schools may not administer investigational drugs or research study medications.

II. Limitations of School Personnel

A. Licensed practical nurses

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

Students

Administration of Medications

II. Limitations of School Personnel (continued)

1. Training in administration of medications as part of their basic nursing program;
2. Successful completion of a pharmacology course and subsequent supervised experience;
3. Supervised experience in the administration of medication while employed in a health care facility.

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

B. Paraprofessionals

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

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

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

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

The following conditions shall be met:

1. The nurse provides the coach with a copy of the authorized prescriber's order and parental permission form, in addition to a copy of an Emergency Care Plan.

Students

Administration of Medications

II. Limitations of School Personnel (continued)

2. Should a student be unable to appropriately perform the administration of emergency cartridge injector for severe allergic reaction, coach will intervene and administer medication as prescribed.
3. Cartridge injector administration procedure reviewed with coach.

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

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

The following conditions must be met:

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

Students

Administration of Medications

II. Limitations of School Personnel (continued)

6. Errors in the administration of medication shall be addressed in the same manner as errors during the school day, except that if the nurse is not available, a report may be submitted by the coach or licensed athletic trainer to the school nurse on the next school day.
7. The coach or licensed athletic trainer shall document administration of medication on forms for individual administration of medication and the school nurse shall be notified of:
 - a. A separate medication administration record for each student shall be maintained in the athletic area;
 - b. Administration of a cartridge injector medication shall be reported to the school nurse at the earliest possible time but not later than the next school day;
 - c. All other instances of the administration of medication shall be reported to the school nurse at least monthly or as frequently as required by the individual student plan;
 - d. The administration of medication record shall be submitted to the school nurse at the end of each sport season and filed in the student's cumulative health record.

III. Training and Supervision of Qualified Personnel for Schools

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

A. Content of training

Training shall include at least the following:

1. The general principles of safe administration of medication;
2. The procedural aspects of administration of medication, including the safe handling and storage of medications, documentation;

Students

Administration of Medications

III. Training and Supervision of Qualified Personnel for Schools

3. Specific information related to each student's medication and each student's medication plan, including the name and generic name of the medication, indications for medication, dosage, routes, time and frequency of administration, therapeutic effects of the medication, potential side effects, overdose or missed dose of the medication and when to implement emergency interventions.

B. Documentation of training sessions

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

1. Dates of general and student-specific trainings;
2. Content of the training;
3. Names of individuals who have successfully completed general and student-specific training for the current school year shall be submitted to the Superintendent by the nursing coordinator on October 31 of each year;
4. A current list of those authorized to give medication shall be maintained in the school;
5. Names and credentials of the nurse or school medical advisor trainers.

C. Supervision of Administration of Medications

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

1. Review orders and changes in orders, and communicate these to personnel designated to give medication;
2. Set up a medication plan and schedule to ensure medications are administered properly;
3. Provide training to qualified personnel and other licensed nursing personnel in the administration of medications and assess that the qualified personnel for schools are competent to administer medication;
4. Support and assist other licensed nursing personnel to prepare for and implement their responsibilities related to the administration of specific medications during school hours;
5. Provide appropriate follow-up to ensure the administration of medication plan results in the desired outcomes;

Students

Administration of Medications

III. Training and Supervision of Qualified Personnel for Schools (continued)

6. Provide consultation by telephone or other means of telecommunication. In the absence of the school nurse, an authorized prescriber or other nurse may provide this consultation;
7. Implement policies and procedures regarding all phases of administration of medications;
8. Review periodically all documentation pertaining to the administration of medications for students;
9. Observe competency to administer medication by qualified personnel for schools who have been newly trained;
10. Periodically review, as needed, with licensed personnel and all qualified personnel for schools regarding the needs of any student receiving medication.

IV. Self-Administration of Medications by Students

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

A. The required documentation for self-administering medication at school includes the items:

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

B. An assessment by school nurse of the student's capacity to self-administer in the school setting by considering that student :

1. Is capable of identifying and selecting the appropriate medication by size, color, amount, or other label identification;
2. Knows the frequency and time of day for which the medication is ordered;

Students

Administration of Medications

IV. Self-Administration of Medications by Students (continued)

3. Can identify the presenting symptoms that require medication;
 4. Administers the medication appropriately;
 5. Maintains safe control of the medication at all times;
 6. Seeks adult supervision whenever warranted; and
 7. Cooperates with the established medication plan; and
 8. Notify authorized prescriber and parent or guardian if the student is unable to demonstrate safe and appropriate self-administration and handling of medication. Document contact with authorized prescriber and parent or guardian and the outcome.
- C. In the case of inhalers for asthma and cartridge injectors for medically diagnosed allergies, the school nurse's review of a student's competency to self-administer shall not be used to prevent a student from retaining and self-administering such medication. In such cases, students may retain possession of inhalers or cartridge injectors at all times while attending school and self-administer such medication with only the written authorization of an authorized prescriber and written authorization from a student's parent or guardian.
- D. The medication is transported by the student and maintained under the student's control in accordance with school policy and the student's medication plan.
- E. Self-administration of controlled medication may be considered for extraordinary situations, such as international field trips, and shall be approved by the school nurse supervisor and the school medical advisor in advance and an appropriate plan must be developed.
- F. Self-administration of medications other than inhalers or epipens will be considered on an individual basis. Written authorization must be on file in the nurse's office from an authorized prescriber, parent/guardian or eligible student to self-administer and shall be approved by the school nurse supervisor. The school nurse supervisor may consult the medical advisor regarding any such request for self-administration. An appropriate plan must be developed.
- G. Self-administration or carrying of over the counter medications is not permitted in New Milford Public Schools.

Students

Administration of Medications

IV. Self-Administration of Medications by Students (continued)

- H. The responsibility of self-administration shall be revoked if the Board of Education Medication Policy for self-administration is violated or if student exhibits behavior that is not safe for student or other students.
- I. Principal and/or appropriate staff will be informed that the student self-administers prescribed medications.

V. Medication Errors: Procedure for Notification and Documentation

- A. Medication error means failure to do any of the following as ordered:
 - 1. Administer a medication to a student;
 - 2. Administer a medication within the time designated by the authorized prescriber;
 - 3. Administer the specific medication prescribed for a student;
 - 4. Administer the correct dosage;
 - 5. Administer medication by the proper route; and/or
 - 6. Administer medication according to generally accepted standards of practice or;
 - 7. Administration of a medication to a student which is not ordered or authorized by the parent or guardian;
 - 8. Inadvertent destruction, theft or loss by other means of medication stored in school.
- B. If an error in medication administration occurs or is suspected, the school nurse or substitute nurse shall immediately assess the student and:
 - 1. Determine error and potential for emergency;
 - 2. Call 911 if applicable;
 - 3. Implement Standing Orders if applicable;
 - 4. Call Poison Control if applicable (1-800-222-1222);
 - 5. Follow directions of Poison Control-note who you spoke to, time call was made, what directions were given, and what actions you took;
 - 6. Call prescribing practitioner-follow prescriber's directions, if applicable;
 - 7. Notify School Nurse Coordinator;
 - 8. Notify student's parent/guardian;
 - 9. Notify principal/administrator;

Students

Administration of Medications

V. **Medication Errors: Procedure for Notification and Documentation** (continued)

10. Monitor student and provide interventions as directed by Poison Control, student's physician, standing orders or nursing protocols, as applicable, until EMS or parent/guardian arrives;
 11. Complete Medication Error Report form;
 12. Document the incident in the student's electronic health record (SNAP). Describe the error and sequence of events thereafter, including nursing assessment and interventions, medical treatment, and exchanges of information; print and attach SNAP Incident Report to the Medication Error Report form. Send the completed Report and Incident Report form to the School Nurse Coordinator.
- C. If qualified personnel other than the school or substitute nurse, make or recognize a medication error, the individual shall immediately notify the school nurse. If the school nurse is not available, the qualified individual shall:
1. In a true emergency call EMS, then Poison Control if applicable.
 2. If not an immediate emergency, follow the sequence of steps in B.1., and B. 4-9 above and consult, as applicable, with the school nurse if available by phone.
 3. Monitor the student and provide first aid care as directed by Poison Control, the student's physician or the school nurse or school nurse coordinator, as applicable, until EMS or parent/guardian arrives.
 4. Document the incident, including all details, on the Medication Error Report form; use and attach an additional page to complete the documentation as needed.
 5. Send the completed form to the School Nurse Coordinator.
 6. Provide a copy of the completed Medication Error Report form to the school nurse who shall file it in the student's CHR.
- D. A medication error or incident report will be completed by nurse or qualified personnel. A copy will be sent to the nursing coordinator who will review with Pupil Personnel. Pupil Personnel will document any corrective action taken.
- E. Any error in the administration of a medication shall be documented in the student's cumulative health record.

Students

Administration of Medications

VI. Medication Emergencies

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

- A. Each health office shall post in a prominent location on or near the medication cabinet the following information:
 - 1. The Poison Control information center telephone number 1-800-222-1222;
 - 2. This section of medication regulations and Section V, Medication Errors;
 - 3. The name of building administrator responsible for decision making in the absence of a school or substitute nurse.
- B. If qualified personnel other than the school or substitute nurse recognize a potential medication emergency, the qualified individual shall immediately notify the school nurse.
- C. In a medication emergency, the school nurse shall proceed as in Section V, Medication Errors, B 1 – B 10; as indicated by the circumstances.
- D. After managing and documenting in SNAP the medication emergency, the school nurse shall generate an incident report.
- E. In the absence of a school or substitute nurse, the building administrator responsible for decision making, the qualified individual off site, such as a teacher on a field trip shall proceed as in Section V, Medication Errors C 1 – C 6 as indicated by circumstances.

VII. Handling and Storage of Medications

- A. All medications, except those approved for self-medication, shall be delivered by the parent or other responsible adult to the school nurse or, in the absence of such nurse, other qualified personnel for schools trained in administration of medication and assigned to the school.
- B. The parent/guardian, responsible adult or eligible student shall deliver medication in the original, properly labeled container directly to the school nurse, principal or other qualified school personnel trained in medication administration.

Students

Administration of Medications

VII. Handling and Storage of Medications (continued)

- C. The school nurse, principal, or other qualified school personnel trained in medication administration will record the medication and quantity received. The individual student medication form will be co-signed with the parent/guardian, responsible adult or eligible student.
- D. The nurse shall examine on-site any new medication, medication order and parent authorization form and develop an administration of medication plan for the student before any medication is administered by any school personnel.
- E. The school nurse shall review all medication refills with the medication order and parent authorization prior to any administration of medication.
- F. All medications shall be properly stored as follows:
 - 1. Except as otherwise determined by a student's emergency care plan, emergency medications shall be stored in an unlocked, clearly labeled and readily accessible cabinet or container in the health room during school hours under the general supervision of the school nurse, or in the absence of the school nurse, the principal or the principal's designee who has been trained in the administration of medication;
 - 2. Emergency medications will be locked beyond the regular school day or program hours, except as otherwise determined by a student's emergency care plan;
 - 3. All other non-controlled medications except those approved for self-medication, shall be kept in a designated locked container, cabinet or closet used exclusively for the storage of medication; and
 - 4. Controlled substances shall be stored separately from other medications in a separate, secure, substantially constructed, locked metal or wood cabinet pursuant to state law.
- G. Access to all stored medications shall be limited to persons authorized to administer medications. Each school or before- and after- school program and school readiness program shall maintain a current list of those persons authorized to administer medications.

Students

Administration of Medications

VII. Handling and Storage of Medications (continued)

- H. All medications, prescription and non-prescription, shall be delivered and stored in their original containers. At least two sets of keys for the medication containers or cabinets shall be maintained for each school building or before- and after-school program and school readiness program. One set of keys shall be maintained under the direct control of the school nurse or nurses and an additional set shall be under the director control of the principal and, if necessary, the program director or lead teacher who has been trained in the general principles of the administration of medication shall also have a set of keys.
- I. Medication requiring refrigeration shall be stored as follow:
 - 1. In a refrigerator at no less than 36°F and no more than 46°F;
 - 2. The refrigerator shall be located in a health office that is maintained for health services purposes with limited access;
 - 3. Non-controlled medications may be stored directly on the shelf of the refrigerator with no further protection needed;
 - 4. Controlled medications shall be stored in a locked box which is affixed to the refrigerator shelf.
- J. No more than a three month supply of a medication for a student shall be stored at the school.
- K. No medication for a student shall be stored at a school without a current written order from an authorized prescriber.
- L. Each school shall maintain a current list of those persons authorized to administer medications.

VIII. Destruction/Disposal of Medication:

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

Students

Administration of Medications

VIII. Destruction/Disposal of Medication (continued)

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

Students

Administration of Medications

VIII. Destruction/Disposal of Medication (continued)

- C. Controlled drugs shall be destroyed in accordance with law, specifically, § 21a-262-3 of the Regulations of the Connecticut State Agencies. School nurse/ nurse coordinator will contact the Drug Control Division of the CT Department of Consumer Protection at 860-713-6055 for assistance. Nurse will follow directions of Drug Control Division, documenting name of the person giving the directions.
- D. Accidental destruction or loss of controlled drugs must be verified in the presence of a second person, including confirmation of the presence or absence of residue and jointly documented on the student medication administration record and on a medication error form. If no residue is present, notification must be made to the Department of Consumer Protection pursuant to 21a-262-3 of the Regulations of the Connecticut State Agencies.

IX. Documentation and Recordkeeping

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

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

Students

Administration of Medications

IX. Documentation and Recordkeeping (continued)

10. For controlled medications, a medication count which should be conducted and documented at least once a week and co-signed by the assigned nurse and a witness;
 11. The medication administration record shall be made available to the State Department of Education for review until destroyed pursuant to law. The completed medication administration record for non-controlled medications may be destroyed in accordance with Section M8 of the Connecticut Municipality Record Retention Schedule as long as it is superseded by a summary on the student health record.
- B. The following shall be filed in the student's cumulative health record or, for before- and after-school programs and school readiness programs, in the child's program record:
1. The written order of the authorized prescriber;
 2. The written authorization of the parent/guardian to administer the medication;
 3. The written parental permission for the exchange of information by the prescriber and school nurse to ensure the safe administration of such medication.
- C. As to any and all controlled drugs administered at school, the completed medication administration record shall be maintained in the same manner as the non-controlled medications, in addition, a record shall be maintained separate from the student's cumulative file for at least three years that includes:
1. Copies of all physician's orders for controlled drugs;
 2. The original medication administration records;
 3. Each school wherein any controlled drug is administered under the provisions of this section shall keep such records thereof as are required of hospitals under the provisions of subsections (f) and (h) of Connecticut General Statutes §21a-254 and shall store such drug in such manner as the Commissioner of Consumer Protection shall, by regulation, require.

Students

Administration of Medications

IX. Documentation and Recordkeeping (continued)

- D. An authorized prescriber's verbal order, including a telephone order, for a change in any medication can be received only by a school nurse. Any such verbal order must be followed by a written order from the authorized prescriber which may be faxed and must be received not later than three (3) school days.
- E. The completed medication administration record for non-controlled medications may be destroyed in accordance with Section M8 of the Connecticut Municipal Records Retention Schedule, provided it is superseded by a summary on the student's cumulative health record.

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

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

- A. At the beginning of each school year, the school nurse supervisor, in consultation with the school medical advisor or other licensed physician, will review the policies and procedures for the administration of medication in these programs and determine the following:
 - 1. The level of nursing services needed in order to ensure safe administration of medication within the programs based on the needs of the program and the program's participants;
 - 2. Who may administer medication and whether a licensed nurse is required on-site;
 - 3. The circumstances under which self-administration of medication by students is permitted;

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

Students

Administration of Medications

X. School Readiness and Before-or After-School Programs (continued)

4. The procedures to be followed in the event of a medication emergency or error and the individuals or facilities to be contacted in such an event;
 5. The manner in which the local poison control center information will be made readily available at these programs;
 6. The person responsible for decision making in the absence of the nurse.
- B. Where possible, a separate supply of medication shall be stored at the site of the before- or after-school or school readiness program. In the event that it is not possible for the parent or guardian to provide a separate supply of medication, then a plan shall be in place to ensure the timely transfer of the medication from the school to the program and back on a daily basis.
- C. Documentation of the administration of medications in school readiness and before- and after-school programs shall be as follows:
1. A separate administration of medication record for each student shall be maintained in the program;
 2. Administration of medication with a cartridge injector shall be reported to the school nurse at the earliest possible time but not later than the next school day;
 3. All other instances of the administration of medication shall be reported to the school nurse according to the student's individual plan or at least on a monthly basis;
 4. The administration of medication record shall be submitted to the school nurse at the end of each school year and filed in or summarized on the student's cumulative health record.

XI. Definition of Terms

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

Students

Administration of Medications

XI. Definition of Terms (continued)

1. **Administration of medication** means any one of the following activities:
handling, storing, preparing or pouring of medication; conveying it to the student according to the medication order; observing the student inhale, apply, swallow, or self-inject the medication, when applicable; documenting that the medication was administered; and counting remaining doses to verify proper administration and use of the medication.
2. **Advanced practice registered nurse** means an individual licensed pursuant to Section 20-94a of the Connecticut General Statutes.
3. **Authorized prescriber** means a physician, dentist, optometrist, advanced practice registered nurse or physician assistant and, for interscholastic and intramural athletic events only, a podiatrist.
4. **Before- and after-school program** means any child care program operated and administered by a local or regional board of education or municipality exempt from licensure by the Department of Public Health pursuant to subdivision (1) of subsection (b) of Section 19a-77 of the Connecticut General Statutes. Such programs shall not include public or private entities licensed by the Department of Public Health or board of education enhancement programs and extra-curricular activities.
5. **Board of education** means the New Milford Board of Education.
6. **Cartridge injector** means an automatic pre-filled cartridge injector or similar automatic injectable equipment used to deliver epinephrine in a standard dose for emergency first aid response to allergic reactions.
7. **CHR or CHR-1** refers to the cumulative health record (see below).
8. **Coach** means an athletic coach as defined in Section 10-222e of the Connecticut General Statutes.
9. **Commissioner** means the Commissioner of Education or any duly authorized representative thereof.
10. **Controlled drugs** means controlled drugs as defined in Section 21a-240 of the Connecticut General Statutes.
11. **Cumulative health record** means the cumulative health record of a pupil mandated by Section 10-206 of the Connecticut General Statutes.
12. **Dentist** means a doctor of dentistry licensed to practice dentistry in Connecticut pursuant to Chapter 379 of the Connecticut General Statutes, or licensed to practice dentistry in another state.

Students

Administration of Medication

XI. Definition of Terms (continued)

13. **Department** means the Connecticut State Department of Education or any duly authorized representative thereof.
14. **Director** means the person responsible for the operation and administration of any school readiness program or before-and after-school program.
15. **Eligible student** means a student who has reached the age of eighteen or is an Emancipated minor.
16. **Error** means:
 - a. failure to do any of the following as ordered:
 - administer a medication to a student;
 - administer medication within the time designated by the prescribing practitioner;
 - administer the specific medication prescribed for a student;
 - administer the correct dosage of medication;
 - administer medication by the proper route; and/or
 - administer the medication according to generally accepted standards of practice; or
 - b. administration of a medication to a student which is not ordered, or which is not authorized in writing by the parent or guardian of such student.
17. **Extracurricular activities** means activities sponsored by local or regional boards of education that occur outside of the school day, are not part of the educational program, and do not meet the definition of before- and after-school programs and school readiness programs.
18. **Guardian** means one who has the authority and obligations of guardianship of the person of a minor, and includes:
 - a. the obligation of care and control, and
 - b. the authority to make major decisions affecting the minor's welfare, including, but not limited to, consent determinations regarding marriage, enlistment in the armed forces and major medical, psychiatric or surgical treatment.
19. **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.

Students

Administration of Medication

XI. Definition of Terms (continued)

20. **Interscholastic athletic events** means events between or among schools for the purpose of providing an opportunity for students to participate in competitive contests which are highly organized and extend beyond the scope of intramural programs and includes tryouts, competition, practice, drills, and transportation to and from such events.
21. **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.
22. **Licensed athletic trainer** means a licensed athletic trainer employed by the school district pursuant to Chapter 375a of the Connecticut General Statutes.
23. **Medication** means any medicinal preparation including over-the-counter, prescription and controlled drugs, as defined in Section 21a-240 of the Connecticut General Statutes.
24. **Medication emergency** means a life-threatening reaction of a student to a medication.
25. **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.
26. **Medication order** means the written direction by an authorized prescriber for the administration of medication to a student which shall include the name of the student, the name and generic name of the medication, the dosage of the medication, the route of administration, the time of administration, the frequency of administration, the indications for medication, any potential side effects including overdose or missed dose of the medication, the start and termination dates not to exceed a 12-month period, and the written signature of the prescriber.
27. **Nurse** means an advanced practice registered nurse, a registered nurse or a practical nurse.
28. **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.

Students

Administration of Medication

XI. Definition of Terms (continued)

29. **Optometrist** means an optometrist licensed to provide optometry pursuant to Chapter 380 of the Connecticut General Statutes.
30. **Paraprofessional** means a health care aide or assistant or an instructional aide or assistant employed by the local or regional board of education who meets the requirements of such board for employment as a health care aide or assistant or instructional aide or assistant.
31. **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.
32. **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.
33. **Physician assistant** means an individual licensed to prescribe medications pursuant to Section 20-12d of the Connecticut General Statutes.
34. **Podiatrist** means an individual licensed to practice podiatry in Connecticut pursuant to Chapter 375 of the Connecticut General Statutes.
35. **Principal** means the administrator in the school.
36. **Qualified personnel for schools** means (a) a full-time employee who meets the local or regional board of education requirements as a principal, teacher, occupational therapist or physical therapist and has been trained in the administration of medication in accordance with Section 10-212a-3 of these regulations; (b) a coach and licensed athletic trainer who has been trained in the administration of medication pursuant to Section 10-212a-8 of these regulations; or (c) a paraprofessional who has been trained in the administration of medication pursuant to Section 10-212a-9 of these regulations.
37. **Qualified personnel for school readiness programs and before- and after-school programs**, means directors or director's designee, lead teachers and school administrators who have been trained in the administration of medication may administer medications pursuant to Section 10-212a-10 of these regulations.
38. **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.

Students

Administration of Medication

XI. Definition of Terms (continued)

- 39. **School** means any educational program which is under the jurisdiction of a board of education as defined by this section excluding extracurricular activities.
- 40. **School medical advisor** means a physician appointed pursuant to Section 10-205 of the Connecticut General Statutes.
- 41. **School nurse** means a nurse appointed pursuant to Section 10-212 of the Connecticut General Statutes.
- 42. **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.
- 43. **School readiness program** means a program that receives funds from the State Department of Education for a school readiness program pursuant to subsection (b) of Section 10-16p of the Connecticut General Statutes and exempt from licensure by the Department of Public Health pursuant to subdivision (1) of subsection (b) of Section 19a-77 of the Connecticut General Statutes.
- 44. **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.
- 45. **SNAP** means the electronic student health record system known as SNAP Health Center.
- 46. **Supervision** means the overseeing of the process of the administration of medication in a school.
- 47. **Teacher** means a person employed full time by a board of education who has met the minimum standards as established by that board of education for performance as a teacher and has been approved by the school medical advisor and school nurse to be designated to administer medications pursuant to Sections 10-212a-1 through 10-212a-7 of the Regulations of Connecticut State Agencies.

Students

Administration of Medication

Legal References:

Connecticut General Statutes:

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

Regulations of Connecticut State Agencies:

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

Regulation approved: June 12, 2001
Regulation amended: June 11, 2002
Regulation amended: August 26, 2003
Regulation amended:

NEW MILFORD PUBLIC SCHOOLS
New Milford, Connecticut

FOR YOUR INFORMATION

Bold Italicized language constitutes an addition

~~Stricken~~ language constitutes a deletion

6146.1(a)

Grade Point Average/Grade Weighting/Class Ranking

A. Grade Point Average & Weighting

New Milford High School uses a letter grading system and a course “weighting system” for all courses offered in the curriculum. The basis of the system is developed on a 4.0 scale, where each letter grade has a corresponding numeric value. All courses are used to determine a student’s grade point average (GPA). In addition to the GPA, all students have a Weighted GPA (WGPA). Each course carries a different weight, depending on its difficulty and rigor. Courses with an Honors distinction carry a +0.83 weight and courses with an Advanced Placement distinction carry a weight of +1.33 from the 4.0 base weight. (See table below)

		<i>Weight</i>	<i>+0.83</i>	<i>+1.33</i>
		<i>Academic</i>	<i>Honors</i>	<i>AP</i>
<i>A+</i>	<i>97-100</i>	<i>4.00</i>	<i>4.83</i>	<i>5.33</i>
<i>A</i>	<i>93 - 96</i>	<i>3.67</i>	<i>4.50</i>	<i>5.00</i>
<i>A-</i>	<i>90 - 92</i>	<i>3.33</i>	<i>4.17</i>	<i>4.67</i>
<i>B+</i>	<i>87 - 89</i>	<i>3.00</i>	<i>3.83</i>	<i>4.33</i>
<i>B</i>	<i>83 - 86</i>	<i>2.67</i>	<i>3.50</i>	<i>4.00</i>
<i>B-</i>	<i>80 - 82</i>	<i>2.33</i>	<i>3.17</i>	<i>3.67</i>
<i>C+</i>	<i>77 - 79</i>	<i>2.00</i>	<i>2.83</i>	<i>3.33</i>
<i>C</i>	<i>73 - 76</i>	<i>1.67</i>	<i>2.50</i>	<i>3.00</i>
<i>C-</i>	<i>70 - 72</i>	<i>1.33</i>	<i>2.17</i>	<i>2.67</i>
<i>D+</i>	<i>67 - 69</i>	<i>1.00</i>	<i>1.83</i>	<i>2.33</i>
<i>D</i>	<i>65 -66</i>	<i>0.67</i>	<i>1.50</i>	<i>2.00</i>
	<i>Below</i>			
<i>F</i>	<i>65</i>	<i>0.00</i>	<i>0.00</i>	<i>0.00</i>

B. Class Ranking

~~English, Social Studies, Math, Science, Foreign Language, and Art History and Appreciation are the only subject area courses counting toward class rank at New Milford High School.~~

Since courses differ in their levels of academic challenge, the weighted grade point average provides a more accurate representation of students’ academic achievement. The weighted system of grading does NOT affect honor roll calculations. It is used only for the purpose of calculating class rank.

Rank in class is computed at the end of the junior year.

Grade Point Average/Grade Weighting/Class Ranking

B. Class Ranking (continued)

- A. Class rank will not be released until the beginning of the senior year. Counselors will inform students of their “individual” rank during September of the senior year, solely for the purpose of applications to college. Grade point average (GPA) and **Weighted Grade Point Average (WGPA)** will be calculated each semester.

~~All ranking courses receive different weights depending on their difficulty. Quality points are different for each level of course: Advanced Placement (40 points), Honor level (30 points), academic level (20 points), general level (10 points). Student's rank is based on grade + quality points for each course per year.~~

- ~~B. The last two letters following the name of the course indicate the level of the course: Advanced Placement: AP, Honors: HN, Academic: AC, General level courses have no designation. Each level has its own point value added to the numerical grade earned for that course: Advanced Placement: 40 points, Honor courses: 30 points, Academic courses: 20 points, General courses: 10 points. This establishes the total rank points for that course. For example, if a student in Geometry AC receives an 83, his/her total rank points for that course is 103 (83+20). This is done for each course taken which counts toward class rank.~~
- ~~C. The sum of the total number or rank points a student has earned is divided by the potential total number of credits the student is able to achieve. For half-credit courses, the rank points are divided by two. The quotient is the student's rank index. The rank in class index for each individual student is determined in this manner. A “potential” credit represents the amount of credit each course is worth. If the student passes, credit is received; if the student fails the course, he or she is still accountable for the amount of credit that the course is worth for the purpose of determining class rank.~~

Students will be identified/clustered according to these percentiles: Top 5%, 10%, 20%, 30%, 40%, 50%, and Bottom 60%, beginning in the Junior year.

Students class rank for members of the graduating class and the determination of the Valedictorian and the Salutatorian will be based on courses taken through the seventh semester. Traditionally, the Valedictorian and Salutatorian speak at graduation. Other seniors in the top 5% of the graduating class may be invited to submit and deliver a speech for consideration at graduation. A committee of teachers and students will select the best speech for delivery at graduation. Speaking at graduation is considered a privilege bestowed by the school administration. The honor of speaking is contingent upon exemplary academic performance as well as exemplary record of social and disciplinary behavior.

Grade Point Average/Grade Weighting/Class Ranking**B. Class Ranking** (continued)**Rank in Class – Transfer Students**

Only course work completed at New Milford High School is utilized for ranking purposes. However, the work completed in another secondary school will be included on the New Milford High School transcript as part of the permanent record of the student.

A student must have completed a minimum of three semesters at New Milford High School, including all of the junior year, to receive an exact place in final class rank, unless approved by the Principal. (See exception below)

Exception

A New Milford High School student, spending a year abroad on an approved foreign exchange program, may be ranked with his/her class. To be ranked with their class, participating students would enter into an agreement with the subject department chairman. This agreement would include instructional objectives, activities and means of assessment. This agreement should be in the form of a contract signed by both parties prior to the student's departure for all exchange programs.

Item of Information

6141.4
Appendix

NEW MILFORD PUBLIC SCHOOLS
New Milford, Connecticut

Independent Study Contract

Guidelines and Procedures

1. Completed approval form must reach the Principal by the end of the second week of the semester or year.
2. The Independent Study course is classified as an elective unless a waiver is granted by the Principal.
3. Independent Study grades are due on the same deadlines as grades in traditional courses.
4. ~~A maximum of two Independent Study credits can be earned in a student's academic career, unless the Board of Education approves any other plan.~~
4. **A maximum of two Independent Study credits can be earned in a student's academic career provided the Superintendent of Schools has granted prior approval to any plan that calls for an individual to be awarded more than two (2) independent credits in his/her high school career.**

Item of Information

Instruction**Home Schooling**

Pursuant to guidance provided by the Connecticut State Department of Education, the New Milford Public Schools shall utilize the following procedures when the parents or other persons having control of a child between the ages of seven and eighteen withdraws their child from school or declines to enroll their child in school in favor of home schooling:

Home Schooling

1. The parents should file, with the Superintendent of Schools, a State Department of Education Notice of Intent form which outlines basic information about the program to be provided to their child. A Notice of Intent will be effective for up to one school year.
2. It is preferable that filing of the Notice of Intent occur at least 10 days before the start of the home schooling program.
3. When the school receives a Notice of Intent, it will be checked for completeness and kept as part of the District's permanent records. A complete form provides basic program information including the name of the teacher, subjects to be taught, days of instruction, and the teacher's method of assessment.
4. A parent, by filing a Notice of Intent, acknowledges full responsibility for the education of their child in accordance with the requirements of state law. Receipt of a Notice of Intent in no way constitutes approval by the school district of the content or effectiveness of a program of home schooling.
5. If a parent fails to file a Notice of Intent or files an incomplete form, a certified letter shall be sent to the parent requesting compliance within ten days. The certified letter shall request the parent to provide the school district with written notice that the child is elsewhere receiving equivalent instruction in the studies taught in the public schools in accordance with Connecticut General Statutes §10-184.
6. An annual portfolio review will be held with the parents and school officials to determine if instruction in the required courses has been given.
7. Any continued refusal by the parent to comply with the reasonable request of the school district for completion and filing of the Notice of Intent or to participate in an annual portfolio review may cause the child to be considered truant.

Instruction

Home Schooling

8. The school district shall not accept or require a Notice of Intent for any child younger than seven years or older than eighteen years of age.

~~Partial Enrollment of Home Schoolers in New Milford Schools~~

~~In addition to all of the above cited guidelines home schooling parents who wish their child to participate in selected academic programs offered by the New Milford Public Schools shall adhere to the following guidelines:~~

- ~~1. Home schooled children who seek partial enrollment shall enroll in the New Milford Public Schools only for the purposes of participating in a designated curricular program and for use in creating class lists, reporting addresses, and emergency contact information. Enrollments shall not be reported to the State Department of Education unless and until their participation exceeds four hours daily or its equivalent.~~
- ~~2. Prior to partial enrollment, all home schooled students shall present evidence to the school nurse of compliance with all relevant state regulations and Board of Education policy regarding immunization and completion of physical examination.~~
- ~~3. No home schooled student shall be admitted for partial enrollment unless that student has previously participated in one semester, or its equivalent, of full time home schooled enrollment.~~
- ~~4. Home schooled students who are accepted for partial enrollment shall be transported to and from school at their parent's expense. It is the responsibility of the parents and the student to adhere to a daily admission and dismissal procedure as outline, in writing, by the school's Principal.~~
- ~~5. Home schooled students shall be assigned to classes for which they enrolled on a space-available basis. Teacher selection is to be the responsibility of the school's administration.~~
- ~~6. Home schooled students who seek partial enrollment in the New Milford Public Schools shall be enrolled for a minimum of two hours daily or its equivalent, unless a waiver of this requirement is granted by the Superintendent. Participation in field trips shall be permitted only when such trips are integral to completion of a course in which the student is enrolled.~~

Instruction

Home Schooling

~~Partial Enrollment of Home Schoolers in New Milford Schools~~ (continued)

7. ~~It is the responsibility of the home-schooled student to adhere to the schedule of classes in which he/she is enrolled. Adherence to adjustments of the class or school schedule by the school authorities is the responsibility of the student and/or his parents.~~
8. ~~Home-schooled students shall receive an assessment of their work at the conclusion of each regularly-scheduled marking period. A copy of this record will be made part of the school's permanent record.~~
9. ~~Home-schooled students who are accepted for partial enrollment are subject to the discipline and attendance regulations established and published by the school. It is the responsibility of the Principal to distribute a copy of all school regulations to all home-schooled students.~~
10. ~~Home-schooled students who seek partial enrollment in the New Milford Public Schools shall be covered for injury or liability under the existing coverage only during the period of their participation in a program supervised by the New Milford Public Schools.~~
11. ~~Home-schooled students who are partially enrolled in the New Milford Public Schools may participate in extra-curricular activities only when their participation adheres to the regulations established by the Connecticut Interscholastic Athletic Conference.~~

Legal References: Connecticut General Statutes

- 10-184 Duties of parents. School attendance age requirements
- 10-220 Duties of boards of education
- 10-249 Enumeration of children of compulsory school age in school districts and by state departments having jurisdiction over such children.
- 10-250 Report showing number of children
- 10-251 Penalty for refusing to give age of child
- Connecticut State Department of Education Circular Letter C-14, Series 1994-1995, "Revised Procedures Concerning Requests from Parents to Education Their Child at Home." (July 15, 1994)

Regulation approved: June 10, 2003
 Regulation revised: June 8, 2010
 Regulation revised:

NEW MILFORD PUBLIC SCHOOLS
 New Milford, Connecticut

**New Milford Board of Education
Policy Meeting Minutes
May 17, 2011
Lillis Administration Building—Room 2**

GEORGE C. BUCKBEE
TOWN CLERK

2011 MAY 20 P 2:09

NEW MILFORD, CT

Present:	Mrs. Wendy Faulenbach, Chairperson Mr. David Lawson Mrs. Alexandra Thomas Mrs. Lynette Celli Rigdon
Absent:	Mrs. Nancy Tarascio-Latour

Also Present:	Dr. JeanAnn C. Paddyfote, Superintendent of Schools Dr. Maureen McLaughlin, Assistant Superintendent Mrs. Adele Johnson, Director of Pupil Personnel & Special Services Mrs. Lynn Holmes, Nurse Coordinator
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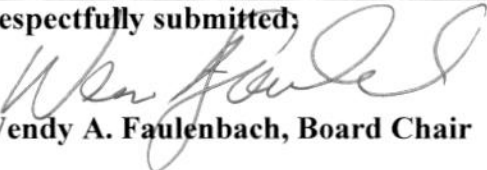
1.	Call to Order The meeting of the New Milford Board of Education Policy Committee was called to order at 6:30 p.m. by Mrs. Faulenbach.	Call to Order
2.	Public Comment <ul style="list-style-type: none"> There was none. 	Public Comment
3.	Discussion and Possible Action	Discussion and Possible Action
A.	Recommended for Revision	Recommended for Revision
3.A.1.	Policy 5141.21 Administration of Medication <ul style="list-style-type: none"> Mrs. Holmes and Mrs. Johnson explained that the language is being changed to identify who qualifies to administer medications. Districts have the option of determining whether or not to allow the administration of over-the counter medicine which is self-administered. The proposed policy does not include that provision. There are self-medication forms which will be reviewed with students. If students are not capable of self medicating, parents and physicians will be informed. The physician can retract permission for medication. Mrs. Thomas inquired if parents would be informed of how the school is handling medication. Mrs. Holmes noted the information is included in the student handbook. Mrs. Faulenbach commented that 9311 would be suspended at the Board meeting in order to 	Policy 5141.21 Administration of Medication

3.A.2.	<p>be able to approve this policy in a timely fashion.</p> <p>Policy 5121.2 Eligibility for Honor Roll</p> <ul style="list-style-type: none"> • Dr. Paddyfote commented that this policy is being revised to align with the proposed changes in scheduling and the conversion to letter grading at the high school. • The policy changes for the middle school include clarification of major and minor subjects. 	<p>Policy 5121.2 Eligibility for Honor Roll</p>
3.A.3.	<p>Policy 6141.4 Independent Study</p> <ul style="list-style-type: none"> • Dr. Paddyfote noted this policy will change approval for independent study. Any student who wants to acquire more than two independent study credits would have to have prior approval in order to obtain the credit. Approval will be granted on a case by case basis. Two independent study courses would normally be the maximum unless based on the unique needs and/or circumstances of the student making the request. • Mrs. Rigdon asked if there was an appeal process. • Dr. Paddyfote replied in the negative unless the Boards requests an appeal process or if it is required by statute. She also noted that an independent study requires a teacher to be an overseer for that study. The purpose of the change is to expedite a student's request. Current policy requires Board action and the case presented in the fall required an executive session. There was approximately a month's delay between the time the student completed the paperwork to make the request and the Board's action on the request. <p>Mrs. Thomas moved to bring Policy 5141.21 Administration of Medication to the Board for revision, motion seconded by Mr. Lawson and passed unanimously.</p> <p>Mrs. Thomas moved to bring Policy 5121.2 Eligibility for Honor Rolls to the Board for revision, motion seconded by Mr. Lawson and passed unanimously.</p>	<p>Policy 6141.4 Independent Study</p> <p>Motion made and passed unanimously to bring Policy 5141.21 Administration of Medication to the Board for revision.</p> <p>Motion made and passed unanimously to bring Policy 5121.2 Eligibility for Honor Rolls to the Board for revision.</p>

	<p>Mrs. Thomas moved to bring Policy 6141.4 Independent Study to the Board for revision, motion seconded by Mr. Lawson.</p> <ul style="list-style-type: none"> Mrs. Rigdon asked for clarification on this vote since she was not in favor of this policy as presented. Mrs. Faulenbach replied that sending the policy to the full Board for discussion and possible action, allows Board members the opportunity to vote either in the affirmative or negative. The motion passed unanimously. <p>Mrs. Faulenbach reminded committee members that Board Policy 9311 will be suspended in order to approve the above mentioned policies in June. The policies are revised at the end of the school year in order to be in effect at the beginning of the next school year.</p>	<p>Motion made and passed unanimously to bring Policy 6141.4 Independent Study to the Board for revision.</p>
4.	<p>Items of Information</p> <p>Mrs. Faulenbach explained regulations are not approved by the Board, but are presented for input and/or questions.</p>	<p>Items of Information</p>
4.A.	<p>Regulation 5141.21 Administration of Medication</p> <ul style="list-style-type: none"> Mrs. Johnson spent time with Drs. Hack and Barth to review this regulation. 	<p>Regulation 5141.21 Administration of Administration</p>
4.B.	<p>Regulation 6146.1 Grade Point Average/Grade Weighting/Class Ranking</p> <ul style="list-style-type: none"> Mr. Lawson questioned the 4.0 scale when it will be possible to exceed 4.0 Dr. Paddyfote explained this change will bring NMHS' calculation of GPA in alignment with the procedure that is recognized by most colleges and universities. Mrs. Thomas commented if this puts our students' applications in comparison with other schools, the change is worth it. 	<p>Regulation 6146.1 Grade Point Average/Grade Weighting/Class Ranking</p>
4.C.	<p>Regulation 6141.4 Independent Study</p> <ul style="list-style-type: none"> This regulation will match the policy. 	<p>Regulation 6141.4 Independent Study</p>

4.D.	Regulation 6172.3 Home Schooling <ul style="list-style-type: none">The change in this regulation will eliminate partial enrollment of students who are home schooled.	Regulation 6172.3 Home Schooling
5.	Adjournment Mrs. Thomas moved to adjourn the meeting at 7:06 p.m., seconded by Mrs. Rigdon and passed unanimously.	Adjournment Motion made and passed unanimously to adjourn the meeting at 7:06p.m.

Respectfully submitted,



Wendy A. Faulenbach, Board Chair