

CONFLICT RESOLUTION/PEER MEDIATION

To promote student safety and contribute to the maintenance of a positive school climate, the Governing Board encourages the development of school-based conflict resolution programs designed to help students learn constructive ways of handling conflict. The Board believes that such programs can reduce violence and promote communication, personal responsibility and problem-solving skills among students.

Conflict resolution strategies shall be considered as part of each school's comprehensive safety plan and incorporated into other district discipline procedures as appropriate. Conflict resolution programs shall not supplant the authority of staff to take appropriate action as necessary to prevent violence, ensure student safety, maintain order in the school, and institute disciplinary measures.

(cf. 0450 - Comprehensive Safety Plan)
(cf. 5137 - Positive School Climate)
(cf. 5144 - Discipline)
(cf. 5144.1 - Suspension and Expulsion/Due Process)
(cf. 5144.2 - Suspension and Expulsion/Due Process (Students with Disabilities))
(cf. 6159.4 - Behavioral Interventions for Special Education Students)

Schoolwide programs may include curriculum in conflict resolution, including, but not limited to, instruction in effective communication and listening, critical thinking, problem-solving processes and the use of negotiation to find mutually acceptable solutions. In addition, the curriculum may address students' ethical and social development, respect for diversity, and interpersonal and behavioral skills.

(cf. 6141 - Curriculum Development and Evaluation)
(cf. 6141.6 - Multicultural Education)

Conflict resolution programs may incorporate peer mediation strategies in which selected students are specially trained to work with their peers in resolving conflicts.

Students' participation in any peer mediation program shall be voluntary and kept confidential by all parties involved.

(cf. 4119.23/4219.23/4319.23 - Unauthorized Release of Confidential/Privileged Information)
(cf. 5125 - Student Records)

In developing a conflict resolution and/or peer mediation program, school-site teams shall address, as appropriate:

1. The grade levels and courses in which the conflict resolution curriculum shall be delivered

(cf. 6143 - Courses of Study)

CONFLICT RESOLUTION/PEER MEDIATION (continued)

2. Staff development related to the implementation of the curriculum and modeling of appropriate behaviors and communication skills

(cf. 4131 - Staff Development)

3. The selection of peer mediators involving, to the extent possible, a cross-section of students in terms of grade, gender, race, ethnicity, and socioeconomic status, and including some students who exhibit negative leadership among peers
4. Training and support for peer mediators, including training in mediation processes and in the skills related to understanding conflict, communicating effectively and listening
5. The process for identifying and referring students to the peer mediation program
6. The types of conflicts suitable for peer mediation

(cf. 5131 - Conduct)

(cf. 5131.1 - Bus Conduct)

(cf. 5131.4 - Campus Disturbances)

(cf. 5136 - Gangs)

(cf. 5145.3 - Nondiscrimination/Harassment)

(cf. 5145.9 - Hate-Motivated Behavior)

(cf. 5145.7 - Sexual Harassment)

7. Scheduling and location of peer mediation sessions
8. Methods of obtaining and recording agreement from all disputants
9. The appropriate involvement of parents/guardians, the community and staff, including counseling/guidance and security staff

(cf. 1020 - Youth Services)

(cf. 1400 - Relations Between Other Governmental Agencies and the Schools)

(cf. 3515.3 - District Police Department)

(cf. 6020 - Parent Involvement)

(cf. 6164.2 - Guidance/Counseling Services)

10. Communications to students, parents/guardians and staff regarding the availability of the program
11. Methods of following up with students to determine the effectiveness of the process

CONFLICT RESOLUTION/PEER MEDIATION (continued)

12. Development of assessment tools to periodically evaluate the success of the program including, but not limited to, measurements of whether there has been a reduction in violence at the school and whether the school's suspension rates have fallen since the program has been introduced

Legal Reference:

EDUCATION CODE

32230-32239 School violence reduction programs

32295.5 Teen court programs

35291-35291.5 Rules

35294-35294.9 School safety plans

44807 Duty concerning conduct of students

CALIFORNIA CONSTITUTION

Article I, Section 28(c) Right to safe schools

Management Resources:

CSBA PUBLICATIONS

Protecting Our Children: Governing Board Strategies to Combat School Violence, revised 1999

CDE PUBLICATIONS

Safe Schools: A Planning Guide for Action, 1995

USDE PUBLICATIONS

Creating Safe and Drug-Free Schools: An Action Guide, 1996

WEB SITES

U.S. Department of Education, Safe and Drug-Free Schools Program:

<http://www.ed.gov/offices/OESE/SDFS/>

California Department of Education, Safe Schools and Violence Prevention Office:

<http://www.cde.ca.gov/spbranch/safety/>

HEALTH CARE AND EMERGENCIES

The Governing Board recognizes the importance of taking appropriate action whenever an emergency threatens the safety, health or welfare of a student at school or during school-sponsored activities. The Superintendent or designee shall ask parents/guardians to provide emergency information in order to facilitate immediate contact with parents/guardians if an accident or illness occurs.

(cf. 5141.1 - Accidents)

Resuscitation Orders

The Board believes that staff members should not be placed in the position of determining whether or not to follow any parental or medical “do not resuscitate” orders. Staff shall not accept or follow any such orders unless they have been informed by the Superintendent or designee that the request to accept such an order has been submitted to the Superintendent or designee, signed by the parent/guardian, and supported by a written statement from the student’s physician and an order from an appropriate court.

The Superintendent or designee shall ensure that all parents/guardians are informed of this policy.

Legal Reference:

EDUCATION CODE

49407 *Liability for treatment*

49408 *Information for use in emergencies*

FAMILY CODE

6550-6552 *Caregivers*

HEALTH CARE AND EMERGENCIES

Emergency Information

Parents/guardians shall furnish the schools with the current information specified below:

1. Home address and telephone number
2. Parent/guardian's business address and telephone number
3. Name, address and telephone number of a relative or friend who is authorized by the parent/guardian to care for the student in cases of emergency when the parent/guardian cannot be reached
4. Local physician to call in case of emergency

Under Education Code 49407, no school district shall be held liable for the reasonable treatment of a student without the consent of the parent/ guardian when the student requires medical treatment and the parent/guardian cannot be reached, unless a written objection to medical treatment has been filed with the school district.

Consent by Caregiver

Persons 18 years of age and older who file with the district a completed caregiver's authorization affidavit shall have the right to consent to or refuse school-related medical care for a district student. The caregiver's authorization shall be valid for one year after the date on which it is executed. The caregiver's decision shall be superseded by any contravening decision of the parent or other person having legal custody of the student, provided that this contravening decision does not jeopardize the student's life, health or safety. (Family Code 6550)

School-related medical care is medical care that is required by state or local governmental authority as a condition for school enrollment, including immunizations, physical examinations, and medical examinations conducted in schools for students. (Family Code 6550)

(cf. 5111.11 - Residency of Students with Caregiver)

ADMINISTERING MEDICATION AND MONITORING HEALTH CONDITIONS

The Governing Board recognizes that students may need to take prescribed medication during the school day in order to be able to attend school without jeopardizing their health.

When the district has received written statements from the student's physician and parent/guardian, designated personnel shall assist the student in taking the medication. In addition, upon written request, designated personnel may assist the student in monitoring, testing or other treatment of an existing medical condition. (Education Code 49423)

(cf. 3530 - Risk Management/Insurance)
(cf. 5141.24 - Specialized Health Care Services)

Upon written request by the parent/guardian and with the approval of the student's physician, a student with an existing medical condition that requires frequent monitoring, testing or treatment may be allowed to self administer this service. The student shall observe universal precautions in the handling of blood and bodily fluids.

(cf. 4119.43/4219.43/4319.43 - Universal Precautions)
(cf. 5141.23 - Infectious Disease Prevention)

Anaphylactic Injections

The Board recognizes that some students have allergies of such severity that they may require an emergency anaphylactic injection during the course of the school day. Parents/guardians who are aware of this foreseeable need may ask the district to provide such injections in accordance with administrative regulations.

School staff who may be required to administer anaphylactic injections shall receive training from qualified medical personnel. They will be authorized to administer the injections in accordance with administrative regulations and will be afforded appropriate liability protection.

(cf. 5141 - Health Care and Emergencies)

Legal Reference: (see next page)

ADMINISTERING MEDICATION AND MONITORING HEALTH CONDITIONS
(continued)

Legal Reference:

EDUCATION CODE

49407 *Liability for treatment*

49408 *Emergency information*

49423 *Administration of prescribed medication for student*

49423.5 *Specialized health care services*

49426 *School nurses*

49480 *Continuing medication regimen; notice*

BUSINESS AND PROFESSIONS CODE

2700-2837 *Nursing, especially:*

2726 *Authority not conferred*

2727 *Exceptions in general*

ADMINISTERING MEDICATION AND MONITORING HEALTH CONDITIONS

Before a designated employee assists in the administration of any prescribed medication to any student during school hours, the district shall have: (Education Code 49423)

1. A written statement from the student's physician detailing the method, amount and time schedules by which the medication is to be taken
2. A written statement from the student's parent/guardian requesting the district to assist the student in taking the medication as prescribed by the physician

Parents/guardians shall be asked to provide a properly labeled pharmacy bottle containing the name and telephone number of the pharmacy, the student's identification, name of the physician, and dosage of the medication to be given.

The designated employee shall:

1. Be responsible for the medication at school and administer it in accordance with the physician's indicated instructions
2. Maintain a list of students needing medication during school hours, including the type of medication, times, and dosage
3. Maintain a log recording the student's name and the time and date when medications were given
4. Keep all medication in a locked drawer or cabinet

Parents/guardians who request that a student be allowed to self administer, monitor or treat his/her existing medical condition must make this request in writing and provide written approval by the student's physician.

Notifications

The Superintendent or designee shall inform all parents/guardian of the following requirements: (Education Code 49480)

1. The parent/guardian of a student on a continuing medication regimen from a nonepisodic condition shall inform the school nurse or other designated certificated employee of the medication being taken, the current dosage and the name of the supervising physician.
2. With the parent/guardian's consent, the school nurse may communicate with the student's physician regarding the medication and its effects and may counsel school personnel regarding the possible effects of the drug on the student's physical, intellectual and social behavior, as well as possible behavioral signs and symptoms of adverse side effects, omission or overdose.

ADMINISTERING MEDICATION AND MONITORING HEALTH CONDITIONS
(continued)

Anaphylactic Injections

1. Parents/guardians of students who may require emergency anaphylactic injections shall provide written permission for authorized staff to administer these injections.
2. Each year, school employees designated by the principal shall receive training in administering anaphylactic injections. Qualified medical personnel shall provide this training.
3. The principal or designee shall schedule inservice meetings to:
 - a. Familiarize authorized staff with the prescribed medications and their location
 - b. Ensure that authorized staff are competent to administer anaphylactic injections
 - c. Train all school personnel to recognize the symptoms of anaphylactic reactions

Physicians and parents/guardians of students who may require anaphylactic injections may be invited to attend these meetings.

4. The principal or designee shall prepare a list naming the students who may need emergency anaphylactic injections. This list shall be given to all concerned staff and updated annually.
5. All medication for injections shall be labeled with the student's name, type of medicine and expiration date.
6. The parents/guardians of students who carry their own kits for the purpose of anaphylactic injections shall so inform the principal or designee, who shall prepare a list naming these students, give it to concerned staff and update the list annually.
7. The principal or designee shall post in the school health office a list of symptoms usually associated with anaphylactic reactions and a clear, specific procedure for administering injections in case of emergency. If authorized staff are not available at the time of an emergency, this written procedure will be followed by anyone who must administer the injection in order to save a life.

S A M P L E

PHYSICIAN'S RECOMMENDATIONS FOR MEDICATION

This form is to be filled in and signed by a licensed physician. The form should then be signed by the parents/guardians and returned to the school.

Student's Last Name First Middle Age Birth Date Month Day Year

Name of School Name of Principal Name of Teacher Type of Class Grade

The law allows any person to assist in carrying out a physician's recommendation. The school recognizes the desirability of following physician's recommendations as nearly as possible at school, just as does a parent at home or any other person (not necessarily a nurse) if the physician requests his/her assistance. The fact that this is a service or accommodation which the school is not legally required to perform is recognized by all parties signing this form, and in so signing they agree to hold the district, its officers, employees or agents, harmless from all liability, suits, claims of whatever nature or kind which might arise out of these arrangements.

Do you wish this child to receive medication at school? [] YES [] NO

If yes, please fill in the following blanks:

Name of Medication Form (tablet, pill, capsule, etc.) Number to be Taken Approximate Time of Day Observed or Assisted by Whom (self, teacher, nurse, etc.)

#1. _____

#2. _____

Precautions, if any _____

How is medicine to be brought to school:

By whom (student, parent, etc.)? _____

How often (daily, weekly, etc.)? _____

In what kind of container (envelope, bottle, plastic container)? _____

Does the physician wish to be able to talk briefly by telephone with someone (teacher, nurse, principal, psychologist) at intervals (weekly, monthly, quarterly) to see how this child is faring? If so, indicate:

Person(s) _____ and intervals _____, and you will be notified as to numbers and times at which the person(s) may usually be reached at school by telephone.

IMPORTANT: Please discontinue this request as of the following date. _____
Month Day Year

After this date, changes or continuance of these arrangements must be secured by filling out a newly dated copy of this form.

Signature	License	Address	Telephone No.	Date
_____	MD. No. _____	_____	_____	_____
Physician				Mo/Day/Yr
Parents' or Guardians' Full Name				Mo/Day/Yr
_____				_____
Parent's or Guardian's Full Name				Mo/Day/Yr

Background Information

LEGAL PROVISIONS

The purpose of allowing medication to be given to students by authorized school personnel is to help provide for their general welfare by following the instructions of their physicians. This position is clarified by the intent seen in the following sections from the Nursing Practice Act (Chapter 6 commencing at Section 2700) Division 2 of the Business and Professions Code):

NURSING OR MINISTRATIONS NOT PROHIBITED BY CHAPTER

"The performance by any person of such duties as required in the physical care of a patient and/or carrying out medical orders prescribed by a licensed physician: provided, such person shall not in any way assume to practice as a professional, registered, graduate or trained nurse." (Business and Professions Code Section 2727 (e)).

PRACTICES UNAUTHORIZED

"This chapter confers no authority to practice medicine or surgery." (Business and Professions Code 2726)

SUGGESTIONS FOR SCHOOL PROCEDURES

The procedures covering medication brought to school to be taken by students according to the provisions listed on the preceding form will be expedited if the following procedures are used:

1. Two copies of the form are supplied: one for the school files and one for the person authorized to administer the medication.
2. Only medication prescribed by the student's physician as being necessary to be taken by the student in the manner listed on this form should be brought to school.
3. Such medication should be taken by the student in accordance with instructions from the physician listed on this form.
4. Medication brought to school to be given to the student according to the provisions listed on this form should be in containers which are clearly marked with the name of the student; the name of the prescribing physician; an identification number or name of the medication; the druggist who dispensed the medication or the manufacturer; and the amount of medication to be taken at specified times or in specific situations.
5. All medications should be kept in a secure place. Any special instructions for storage or security measures of any medication should be written by the physician and given to school personnel so that such instructions can be followed.

INFECTIOUS DISEASES

The Governing Board recognizes its dual responsibility to protect the health of students from risks posed by infectious diseases and to uphold the right of students to a free and appropriate education. The district requires all staff to routinely observe universal precautions to prevent exposure to bloodborne pathogens and prevent the spread of all infectious disease.

(cf. 4119.42/4219.42/4319.42- Exposure Control Plan for Bloodborne Pathogens)

(cf. 4119.43/4219.43/4319.43 - Universal Precautions)

(cf. 5141.23 - Infectious Disease Prevention)

The admission of a student with a disease that is contagious within the school setting shall be determined by the Superintendent or designee in accordance with standard procedures. The district shall exclude students only in accordance with law.

(cf. 5112.2 - Exclusions from Attendance)

(cf. 5141.26 - Tuberculosis Testing)

(cf. 5141.3 - Health Examinations)

Students with Bloodborne Pathogen Infections

The Board recognizes that human immunodeficiency virus (HIV) and hepatitis B virus (HBV) are bloodborne pathogens and not casually transmitted. Children with bloodborne pathogen infections are entitled to attend school and receive a free and appropriate public education. The sole presence of bloodborne pathogens is not sufficient reason to exclude students from attending school.

Parents/guardians are encouraged to inform the Superintendent or designee if their child has HIV/AIDS so that school staff may keep the student's parents/guardians informed of any outbreak of disease at school. The district will work cooperatively with the student's parent/guardian and physician to minimize the child's exposure to other diseases in the school setting.

The Board desires to be supportive of students infected with bloodborne pathogens and to help their families cope with difficulties they may face. The Board believes that schools can play an important role in educating the school community about the nature of bloodborne pathogens and alleviating fears about their transmission.

(cf. 6158 - Independent Study)

(cf. 6159 - Individualized Education Program)

(cf. 6183 - Home/Hospital Instruction)

Legal Reference: (see next page)

INFECTIOUS DISEASES (continued)

Legal Reference:

EDUCATION CODE

48210-48214 *Persons excluded*

49073-49075 *Privacy of pupil records*

49076 *Access to records by persons without written consent or under judicial order*

49403 *Cooperation in control of communicable disease and immunization of students*

49405 *Smallpox control*

49406 *Examination for tuberculosis (employees)*

49408 *Information of use in emergencies*

49450 *Rules to insure proper care and secrecy*

49451 *Parent's refusal to consent to medical exam*

49602 *Confidentiality of student information*

CALIFORNIA CONSTITUTION

Article I, Section 1 *Right to Privacy*

CIVIL CODE

56-56.37 *Confidentiality of Medical Information Act*

1798-1798.76 *Information Practices Act*

HEALTH AND SAFETY CODE

120230 *re exclusion for communicable disease*

120325-120380 *Immunization against communicable diseases*

120975 *Prohibition against compelling identification of AIDS test subjects*

120980 *Unauthorized disclosures*

121010 *Disclosure to certain persons without written consent*

121075-121125 *Acquired Immune Deficiency Syndrome Research Confidentiality Act*

121475-121520 *Tuberculosis tests for pupils*

UNITED STATES CODE, TITLE 20

1232 *Family Educational and Privacy Rights Act*

1400 *et seq. Education for All Handicapped Children*

UNITED STATES CODE, TITLE 29

794 *Section 504 of the Rehabilitation Act of 1973*

COURT DECISIONS

Phipps v. Saddleback Valley Unified School District (1988) 204 Cal. App. 3d 1110

Thomas v. Atascadero Unified School District, (1987) 662 F. Supp. 376

Doe v. Belleville Public School District, (1987) 672 F. Supp. 342

Management Resources:

CDE PROGRAM ADVISORIES

0509.86 *AIDS Guidelines*

1016.89 *Guidelines for Informing School Employees about Preventing the Spread of Infectious Diseases, including Hepatitis B and AIDS/HIV Infections and Policies for Dealing with HIV-Infected Persons in School Settings*

INFECTIOUS DISEASES

In determining whether to exclude a child with a suspected or diagnosed infectious disease, the Superintendent or designee shall consult the child's parent/guardian and the student's physician and/or the County Health Department, as required by law. The Superintendent or designee also may refer to the State Department of Health Services document Control of Communicable Disease in California for assistance in this determination.

Confidentiality

The Superintendent or designee shall ensure that student confidentiality rights are strictly observed in accordance with law. No district employee shall release medical information, including knowledge of a bloodborne pathogen infection, without written consent from the parent/guardian. Such information may be shared only with those persons specifically named in the written permission.

(cf. 5141.21 - Administering Medication and Monitoring Health Conditions)

Review Team

The Superintendent or designee shall convene a review panel to make recommendations regarding appropriate programs and services. The parent/guardian must provide written permission for the disclosure of confidential information to each review panel member.

INFECTIOUS DISEASE PREVENTION

The Governing Board recognizes its responsibility to consistently take precautions to prevent the spread of infectious diseases. A comprehensive approach to disease prevention requires the cooperation of the home and the community.

(cf. 1020 - Youth Services)

All students and employees shall be informed of the universal precautions to be used whenever anyone is exposed to blood or other body fluids through injury or accident. Science laboratory instruction shall be designed to protect students from contact with body fluids and with contaminated needles, sharps and other objects.

(cf. 4119.42/4219.42/4319.42 - Exposure Control Plan for Bloodborne Pathogens)

(cf. 4119.43/4219.43/4319.43 - Universal Precautions)

(cf. 5141.1 - Accidents)

(cf. 5141.31 - Immunizations)

(cf. 6142.2 - AIDS Prevention Instruction)

(cf. 6145.2 - Athletic Competition)

Legal Reference:

EDUCATION CODE

49403 *Cooperation in control of communicable disease and immunization of pupils*

51202 *Instruction in personal and public health and safety*

CODE OF REGULATIONS, TITLE 8

5193 *California Bloodborne Pathogens Standard*

CODE OF REGULATIONS, TITLE 17

2500-2508 *Communicable disease reporting requirements*

Management Resources:

CDE PROGRAM ADVISORIES

0509.86 *AIDS Guidelines*

1016.89 *Guidelines for Informing School Employees about Preventing the Spread of Infectious Diseases, including Hepatitis B and AIDS/HIV Infections and Policies for Dealing with HIV-Infected Persons in School Settings*

SPECIALIZED HEALTH CARE SERVICES

The Governing Board is aware that some district students may require specialized physical health care services during the school day in order to attend school. In accordance with the student's individualized education program or written accommodation plan, trained and qualified personnel shall perform these services under the supervision of a school nurse, public health nurse or licensed physician.

(cf. 0430 - Comprehensive Local Plan for Special Education)
(cf. 6164.6 - Identification and Education under Section 504)

Legal Reference:

EDUCATION CODE

49423.5 Specialized physical health care services

56000-56606 Special Education Programs

CODE OF REGULATIONS, TITLE 5

3051.12 Health and Nursing Services

UNITED STATES CODE, TITLE 20

1400-1487 Individuals with Disabilities Education Act

UNITED STATES CODE, TITLE 29

701-795a. Rehabilitation Act of 1973

794 Rehabilitation Act of 1973, Section 504

CODE OF FEDERAL REGULATIONS, TITLE 34

300.24 Related services

Management Resources:

CDE PUBLICATIONS

Guidelines and Procedures for Meeting the Specialized Physical Health Care Needs of Pupils (The Green Book)

SPECIALIZED HEALTH CARE SERVICES

The parent/guardian of students who require specialized physical health care services during the school day shall provide a written request for the needed physical health care service. (5 CCR 3051.12(b)(3)(E)) This request shall include:

1. The student's name, address and phone number
2. The physician's name, address and phone number
3. The needed health care procedure
4. Statement authorizing qualified school personnel to perform the procedure, as approved by the physician (5 CCR 3051.12(b)(3)(E))
5. Statement agreeing to notify the school immediately of any change in the child's regimen or the authorizing physician
6. Statement agreeing to provide all supplies needed for the procedure

The student's physician shall submit a written statement authorizing the administration of the specified physical health care service (5 CCR 3051.12(b)(3)(E)) This statement shall indicate:

1. The student's name and address
2. Condition for which treatment is to be given
3. Specific procedure to be given (5 CCR 3051.12)
4. Time schedules for the procedure (5 CCR 3051.12)
5. Precautions, possible untoward reactions and recommended intervention

(cf. 5125 - Student Records)

The program administrator shall name the qualified school personnel who will perform the service in accordance with standardized procedures.

A qualified school nurse, public health nurse or licensed physician and surgeon shall supervise physical health care services in the school setting in accordance with law. (Education Code 49423.5; 5 CCR 3051.12)

SPECIALIZED HEALTH CARE SERVICES (continued)

Qualified personnel shall be trained in accordance with law. They shall possess a current valid certificate from an approved program in cardiopulmonary resuscitation and shall be able to demonstrate current knowledge of community emergency medical resources and skill in the use of equipment and the performance of techniques necessary to provide specialized health care services. (Education Code 49423.5; 5 CCR 3051.12(b)(1)(C))

Schools shall provide appropriate accommodations for safety and necessary physical care services. The student's personal privacy and dignity shall be assured. (5 CCR 3051.12)

Staff designated to perform the specialized service shall maintain and sign a daily record of these services on a district form. (5 CCR 3051.12(b)(1)(E)) This form shall be kept either in the student's classroom or in the school health office, depending on the health services being provided.

TUBERCULOSIS TESTING

The Governing Board recognizes that tuberculosis poses a public health threat. Treatment of active cases of this disease is the most effective means of controlling its spread.

The number of tuberculosis cases in our county is on the rise. The County Public Health Officer therefore requires tuberculosis testing, and follow-up if appropriate, before students enter school.

The Superintendent or designee may require a tuberculosis skin test when qualified medical personnel reasonably suspect that a student has active tuberculosis. If there is an outbreak of tuberculosis at any school, the Superintendent or designee may require all students at the school to undergo tuberculosis skin tests.

Students known to have had a positive tuberculosis skin test shall be excluded from school until they provide evidence of a follow-up x-ray and appropriate medical care or are no longer suspected of having active tuberculosis.

(cf. 5112.2 - Exclusions from Attendance)
(cf. 5141.3 - Health Examinations)

All district staff shall receive information on how tuberculosis is spread and how it can be prevented and treated.

(cf. 4119.43/4219.43/4319.43 - Universal Precautions)
(cf. 5141.22 - Infectious Diseases)
(cf. 5141.23 - Infectious Disease Prevention)

Legal Reference:

EDUCATION CODE

48211 Habits and disease

49450 Rules to insure proper care and secrecy

49451 Parent's refusal to consent

HEALTH AND SAFETY CODE

120230 Exclusion of persons from school

120875 Providing information to school districts on AIDS, AIDS-related conditions and Hepatitis B

120880 Information to employees of school district

121475-121520 Tuberculosis tests for pupils

TUBERCULOSIS TESTING

The following protocol shall be followed for any student who has a positive TB skin test:

1. The parent/guardian must provide the school with the results of a chest x-ray before the student enters class. If no x-ray has been done, the parent/guardian shall be given a TB follow-up form to take to his/her personal physician or to the county public health office. The student must then obtain a chest x-ray and bring proof that the film was taken for school entry.
2. If the TB form is not returned with x-ray results within two weeks, the Superintendent or designee shall contact the student and family for information about the x-ray report.
3. If the student is found to have active infectious tuberculosis on chest x-ray and sputum tests, the student shall not be admitted to school until a physician's note is presented, showing that the student is free of communicable tuberculosis. (Health and Safety Code 121485, 121495)
4. If the x-ray is negative and the student admitted, the Superintendent or designee may contact the student and family again in four to six weeks to determine that they have followed through with a medical appointment for the INH preventive medication program, if indicated.

HEALTH EXAMINATIONS

The Governing Board recognizes that periodic health examinations of students may lead to the detection and treatment of conditions that impact learning. Health examinations also may help in determining whether special adaptations of the school program are necessary.

In addition to verifying that students have complied with legal requirements for health examinations and immunizations before enrolling in school, the district shall administer tests for vision, hearing and scoliosis as required by law.

(cf. 5141.26 - Tuberculosis Testing)
(cf. 5141.31 - Immunizations)
(cf. 5141.32 - Screening for School Entry)
(cf. 5141.6 – School Health Services)

The Superintendent or designee shall ensure that staff employed to examine students exercise proper care of each student and that examination results are kept confidential. Records related to these examinations shall be available only in accordance with law.

(cf. 5125 - Student Records)

Reports to the Board regarding the number of students found to have physical problems and the effort made to correct them shall in no way reveal the identity of students.

Legal Reference:

EDUCATION CODE

- 44871-44879 *Employment qualifications*
- 49400-49413 *General powers-school boards (re pupil health)*
- 49422 *Supervision of health and physical development*
- 49450-49457 *Physical examinations (of pupils)*
- 49460-49466 *Development of standardized health assessments*

HEALTH AND SAFETY CODE

- 120325-120380 *Immunization against communicable diseases*
- 121475-121520 *Tuberculosis tests for pupils*

CODE OF REGULATIONS, TITLE 5

- 590-596 *Vision screening*
- 3027 *Hearing and vision screening for special education*
- 3028 *Audiological screening*

HEALTH EXAMINATIONS

The principal at each school shall notify parents/guardians of the rights of students and parents/guardians related to health examinations. (Education Code 48980)

(cf. 5141.32 - Health Screening for School Entry)

(cf. 5145.6 - Parental Notifications)

(cf. 5145.6 - Parental Notifications)

A parent/guardian may annually file a written statement with the principal withholding consent to the physical examination of his/her child. The child shall be exempt from any physical examination but shall be subject to exclusion from attendance when contagious or infectious disease is reasonably suspected. (Education Code 49451; 20 USC 1232h)

(cf. 5112.2 - Exclusions from Attendance)

(cf. 5141.22 - Infectious Diseases)

(cf. 5141.26 - Tuberculosis Testing)

Vision and Hearing Tests

Students shall have their vision and hearing tested by qualified personnel authorized by the district. (Education Code 49452, 49454)

(cf. 5141.6 - School Health Services)

All students shall be tested for visual acuity when they first enroll in elementary school and every three years thereafter until the student completes grade 8. External observations of the student's eyes, visual performance and perception shall be made by the school nurse and the classroom teacher. (Education Code 49455)

For male students, color vision shall be tested one time, after the student reaches grade 1. Results of the test shall be entered into the student's health record. (Education Code 49455)

Evaluation of a student's vision may be waived at the parent/guardian's request if the parent/guardian presents a certificate from either a medical doctor or an optometrist specifying the results of an examination of the student's vision including visual acuity, and, in male students, color vision. (Education Code 49455)

Visual defects or any other defects found as a result of the vision examination shall be reported to the parent/guardian with a request that remedial action be taken to correct or cure the defect. If made in writing, such reports shall not include a referral to any private practitioner, and the report of a visual defect shall be made on a form prescribed by the Superintendent of Public Instruction. (Education Code 49456)

The student may be referred to a public clinic or diagnostic and treatment center operated by a public hospital or by the state, county or city department of public health. (Education Code 49456)

HEALTH EXAMINATIONS (continued)

Scoliosis Screening

Each female student in grade 7 and each male student in grade 8 shall be screened for scoliosis. This screening shall comply with California Department of Education standards and shall be performed by qualified personnel as specified in law. (Education Code 49452.5)

Persons performing the screening shall not solicit, encourage or advise treatment of the student for scoliosis or any other condition discovered in the course of the screening. (Education Code 49452.5)

The parent/guardian of any student suspected of having scoliosis shall receive a notice which includes an explanation of scoliosis and describes the significance of treatment at an early age. This notice shall also describe the public services available for treatment and include a referral to appropriate community resources. (Education Code 49452.5)

IMMUNIZATIONS

To be admitted to school, children must be fully immunized in accordance with law. Children shall be excluded from school or exempted from immunization requirements only as allowed by law.

(cf. 1400 - Relations between Other Governmental Agencies and the Schools)

(cf. 5112.1 - Exemptions from Attendance)

(cf. 5112.2 - Exclusions from Attendance)

(cf. 5141.22 - Infectious Diseases)

(cf. 5141.3 - Health Examinations)

In order to ensure that children who have not been immunized may be enrolled in school without delay, the Superintendent or designee may arrange for qualified medical personnel to administer the immunizations at school in accordance with law. Immunizations shall not be given without parental consent.

(cf. 5145.6 - Parental Notifications)

Transfer Students

To enroll in school, all transfer students must present a written immunization record which shows at least the month and year of each immunization. The student shall receive all required immunizations currently due before he/she is admitted to school.

Legal Reference:

EDUCATION CODE

46010 Absences excluded in computing attendance

48216 Immunization; absence not excluded in computing attendance

48980 Required notification of rights

49403 Cooperation in control of communicable disease and immunizations

HEALTH AND SAFETY CODE

120325-120380 Immunization against communicable disease especially:

120335 Immunization requirement for admission

CODE OF REGULATIONS, TITLE 17

6000-6075 School attendance immunization requirements

IMMUNIZATIONS

Upon enrollment, students must present evidence of full immunization against diphtheria, pertussis (whooping cough), tetanus (Td), poliomyelitis, measles, mumps and rubella (MMR) as documented by a physician, nurse or clinic in the manner prescribed by the State Department of Health Services. Students seven years old or older shall not be required to be immunized against pertussis or mumps. (Health and Safety Code 120335)

Upon enrollment, children entering school or a child care and development program at the kindergarten level or below shall also present evidence of immunization against hepatitis B. Children who have not reached the age of four years, six months shall also present evidence of immunization against haemophilus influenzae type b. (Health and Safety Code 120335)

Upon enrollment on or after July 1, 1999, children entering, advancing, transferring or repeating 7th grade shall present evidence of hepatitis B immunization. (Health and Safety Code 120335)

Any student without the required evidence of immunization shall be excluded from school until the immunization is obtained or until the student presents a letter or affidavit of exemption from his/her parent/guardian or physician. Exemption is allowed when the parent/guardian states in writing that immunization is contrary to his/her beliefs. Exemption is also allowed to the extent indicated by a physician's written statement describing the medical condition of the child and the probable duration of the medical condition or circumstances which contraindicate immunization. (Health and Safety Code 120365, 120370, 120375)

The district may conditionally admit a child with documentation from a physician that: (Health and Safety Code 120340; 17 CCR 6000)

1. He/she has received some but not all required immunizations and is not due for any vaccine dose at the time of admission
2. He/she has a temporary exemption from immunization for medical reasons

The Superintendent or designee shall review the immunization record of each student admitted conditionally every 30 days until that student has received all of the required immunizations. (17 CCR 6070)

In accordance with law, the Superintendent or designee shall notify parents/guardians of the rights of students and parents/guardians relating to immunizations. (Education Code 48216, 48980)

(cf. 5145.6 - Parental Notifications)

IMMUNIZATIONS (continued)

When admission has been denied because of lack of immunization, the Superintendent or designee shall notify the parent/guardian that he/she has 10 school days in which to supply evidence of proper immunization or an appropriate letter of exemption. This notice shall refer the parent/guardian to the child's usual source of medical care. (Education Code 48216; 17 CCR 6040)

If no usual source of medical care exists, the parent/guardian shall be referred to the county health department. (Education Code 48216)

The district shall exclude from further attendance any student who fails to obtain the required immunization within no more than 10 school days following receipt of the parent/guardian notice specified above, unless the student is exempt from immunization for medical reasons or personal beliefs. The student shall remain excluded from school until he/she has received another dose of each required vaccine due at that time. The student shall also be reported to the attendance supervisor or principal. (17 CCR 6055)

(cf. 5112.2 - Exclusions from Attendance)

Immunizations shall not be given without parental consent. (Education Code 49403)

The Superintendent or designee shall annually file a report with the state and local health departments on the immunization status of new entrants or when needed to determine immunization status. (Health and Safety Code 120375; 17 CCR 6075)

CHILD HEALTH AND DISABILITY PREVENTION PROGRAM

When parents/guardians enroll their children in kindergarten, the district shall inform them about their obligation to obtain or waive a health screening for their children before they enter first grade. The district shall also inform them about the availability of free health screening for low-income children, as provided under the Child Health and Disabilities Prevention Program, and about the evaluation services and other benefits provided under Division 106, Part 2, Chapter 3, Article 6 of the Health and Safety Code. (Health and Safety Code 124100, 124105)

The above information shall be provided with notifications about immunization requirements and when parents/guardians enroll any first grade children who have not attended kindergarten in the district. The district shall encourage parents/guardians to arrange for their children to obtain their health screening prior to or during their kindergarten year.

(cf. 5141.31 - Immunizations)

The Superintendent or designee may arrange for local health authorities to offer health examinations at school sites.

(cf. 1020 - Youth Services)

During the first 90 days of school, the Superintendent or designee may contact any first grade parents/guardians who have not provided evidence of a health screening or a waiver. If any parents/guardians do not respond to this notification, the Superintendent or designee may contact them a second time to ensure that they understand that their children may be eligible to receive a health screening at no cost.

The Board shall exclude from school, for up to five days, any first grade student who does not present evidence of a health screening or an appropriate waiver on or before the 90th day after entering the first grade. This exclusion shall begin on the 91st calendar day after the student's entrance into the first grade. If school is not in session that day, the exclusion shall begin on the next succeeding schoolday. Within limits established in law, the Superintendent or designee may exempt from exclusion students whose parents/guardians failed to respond to district attempts to obtain evidence of health screening or a signed waiver. (Health and Safety Code 124105)

(cf. 5112.2 - Exclusions from Attendance)

The Superintendent or designee shall annually provide the county Child Health and Disability Prevention Program, the State Department of Health Services and the California Department of Education with the health screening information required by law. (Health and Safety Code 124100)

Legal Reference: (see next page)

CHILD HEALTH AND DISABILITY PREVENTION PROGRAM (continued)

Legal Reference:

HEALTH AND SAFETY CODE

104395 Child Health Disability Prevention Program expansion

124025-124100 Child Health and Disability Prevention Program, especially:

124040 Establishment of programs; standards for procedures

124085 Certificate of receipt; health screening and evaluation services; waiver by parent or guardian

124100 School districts and private schools; information to parents or guardians of kindergarten children

124105 Hughes Children's Health Enforcement Act

HEAD LICE

To prevent the spread of head lice infestations, school employees shall report all suspected cases of head lice to the school nurse or designee as soon as possible. The school nurse or designee shall examine the student, and if feasible, any siblings of affected students or members of the same household. If a current infestation (live lice or nits within ¼” of the scalp) is identified, the student shall be excluded from attendance and parents/guardians informed about recommended treatment procedures and sources of further information.

(cf. 5141.3 - Health Examinations)
(cf. 5141.6 - School-Based Health and Social Services)

The school nurse or designee shall send home the notification required by law for excluded students. (Education Code 48213)

(cf. 5112.2 - Exclusions from Attendance)
(cf. 5145.6 - Parental Notifications)

If there are two or more students affected in any class, all students in the class shall be examined, and information about head lice shall be sent home to all parents/guardians of those students.

Staff shall maintain the privacy of students identified as having head lice and excluded from attendance.

(cf. 4119.23/4219.23/4319.23 - Unauthorized Release of Confidential/Privileged Information)

Excluded students may return to school when (1) they bring a note from the parent/guardian verifying treatment, and (2) reexamination by the school nurse or designee shows that all live lice or nits within ¼” of the scalp have been removed.

Legal Reference:
EDUCATION CODE
48210-48214 Persons excluded
49451 Physical examinations: parent's refusal to consent

HEAD LICE

School employees shall report all suspected cases of head lice to the school nurse or designee as soon as possible. The school nurse or designee shall examine the student and any siblings of affected students or members of the same household. If a current infestation (live lice or nits within ¼” of the scalp) is identified, the student shall be excluded and parents/guardians informed about recommended treatment procedures, ways to check the hair, and sources of further information.

The principal or designee shall send home the notification required by law for excluded students. (Education Code 48213)

If there are more than two students affected in any one classroom, all students in the class shall be examined and information about head lice shall be sent home to all parents/guardians in the class.

Excluded students may return to school when they bring a note from the parent/guardian indicating the treatment used and when reexamination by the nurse or designee shows that all and nits within ¼” of the scalp have been removed.

It is necessary that efforts be made to effectively control head lice as soon as it becomes evident that a student may be infested. In order to keep a simple case of pediculus (head lice) from turning into a widespread problem, there is a need for individuals to work together to eradicate the problem. School and medical personnel must work cooperatively with students and parents/guardians to initiate the steps necessary to treat and eliminate head lice. Classroom teachers should report all suspected infestations to the Principal. Control depends on prompt detection, proper administration, effective treatment, and spread prevention.

The following procedures are to be followed when a student has been found to have head lice:

1. Parents/guardians are to be immediately contacted and the student excluded from school in order to receive proper treatment.

Information shall be made available to the parents/guardians, including recommendations for treatment with an anti-lice shampoo, for the student infested and the procedures to be followed to eliminate head lice in the home.

2. Upon readmittance of the student to school, the parents/guardians shall be obligated to verify that the student received the necessary treatment and recognition that a second treatment is necessary within an eight- (8) to ten- (10) day period. The student shall be inspected by the school nurse or designee to determine the state of the status of the head lice.

HEAD LICE (continued)

3. If the student were again identified as being infested, Procedures 1 and 2 above shall again be followed. In addition, the student, upon returning to school, shall again be inspected by the school nurse or designee to determine the status of the head lice. If there is an indication that head lice or nits within ¼” of the scalp are present the student shall again be denied admission and Procedures 1-3 will be again followed.

4. If the student were again identified for the third time as having head lice the student shall again be excluded. Prior to readmission there will be a home visit or a conference held to discuss the procedures to be followed by the parents/guardians to eradicate the head lice problem in the home and to verify that the appropriate shampoo treatment has been administered to the infested student. Upon verification by the school nurse or designee the student shall be readmitted to school.

CHILD ABUSE REPORTING PROCEDURES

The Governing Board recognizes that the district has a responsibility to facilitate the prompt reporting of incidents of child abuse and neglect. The Superintendent or designee shall ensure that parents/guardians have access to procedures whereby they can report suspected child abuse at a school site to appropriate child protective agencies.

(cf. 1312.1 - Complaints Concerning District Employees)
(cf. 5141.41 - Child Abuse Prevention)

The Superintendent or designee shall establish regulations for use by employees in identifying and reporting child abuse.

District employees shall report known or suspected incidences of child abuse in accordance with district regulations and state law. Employees shall fully cooperate with the child protective agencies responsible for reporting, investigating and prosecuting cases of child abuse.

(cf. 4112.9/4212.9/4312.9 - Employee Notifications)

The Superintendent or designee shall provide training in child abuse identification and reporting for all certificated personnel.

The Superintendent or designee shall also provide training in the duties of child abuse identification and reporting to instructional and teacher aides, teacher assistants and other classified employees. (Penal Code 11165.7)

As part of their training in child abuse identification and reporting, employees shall receive written notice of state child abuse reporting requirements and employees' confidentiality rights. (Penal Code 11165.7)

Employees who work with dependent adults shall be notified of legal responsibilities and reporting procedures pursuant to Welfare and Institutions Code 15630-15637.

In order to reduce or eliminate unfounded child abuse accusations directed at school employees, child abuse inservice training shall include guidance in disciplining students and maintaining ethical relationships with them.

(cf. 3514 - Environmental Safety)
(cf. 5142 - Safety)
(cf. 5145.7 - Sexual Harassment)

Legal Reference: (see next page)

CHILD ABUSE REPORTING PROCEDURES (continued)

Legal Reference:

EDUCATION CODE

33308.1 *Guidelines on procedure for filing child abuse complaints*

44690-44691 *Staff development in the detection of child abuse and neglect*

48906 *Notification when student released to peace officer*

PENAL CODE

273a *Willful cruelty or unjustifiable punishment of child; endangering life or health*

11164-11174.3 *Child Abuse and Neglect Reporting Act, especially:*

11165-11165.15 *Definitions relating to child abuse*

11166-11170 *Reporting known or suspected cases of child abuse*

11172 *Immunity from liability*

11174.3 *Interviewing victim at school*

WELFARE AND INSTITUTIONS CODE

600-601.2 *Referral to school attendance review board; minors habitually disobedient or truant*

15630-15637 *Dependent adult abuse reporting*

STATUTES OTHER THAN CODE

Chapter 1102, Statutes of 1991, Section 6

Management Resources:

CDE LEGAL ADVISORIES

0514.93 *Guidelines for parents to report suspected child abuse by school district employees or other persons against a pupil at school site*

CHILD ABUSE REPORTING PROCEDURES

Duty to Report

Certificated employees and classified employees trained in child abuse identification and reporting shall report known or suspected child abuse to a child protective agency by telephone immediately or as soon as practically possible and in writing within 36 hours. The reporting duties are individual and cannot be delegated to another individual except under circumstances set forth in Penal Code 11166.

Definitions

1. "Child Abuse" includes the following:
 - a. A physical injury inflicted by other than accidental means on a child by another person
 - b. Sexual abuse of a child
 - c. Willful cruelty or unjustifiable punishment of a child, or willfully inflicting unjustifiable physical pain or mental suffering, or failure to safeguard a child from these injuries when the child is under a person's care or custody
 - d. Unlawful corporal punishment or injury resulting in a traumatic condition
 - e. Neglect of a child or abuse in out-of-home care
2. "Mandated Reporters" are those people defined by law as "child care custodians," "health practitioners," "child visitation monitors" and "employees of a child protective agency." Mandated reporters include virtually all school employees. The following school personnel are required to report:

Teachers, administrators, supervisors of child welfare and attendance, certificated student personnel employees, employees of a child care institutions, headstart teachers, school psychologists, licensed nurses, counselors, presenters of child abuse prevention programs and those instructional aides or other classified employees trained in child abuse reporting.
3. "Child Protective Agencies" are those law enforcement and child protective services responsible for investigating child abuse reports, including the local police or sheriff department, county welfare or juvenile probation department and child protective services.

CHILD ABUSE REPORTING PROCEDURES (continued)

4. "Reasonable Suspicion" means that it is objectively reasonable for a person to entertain such a suspicion, based upon facts that could cause a reasonable person in a like position, drawing when appropriate on his/her training and experience, to suspect child abuse. (Penal Code 11166)

Reporting Procedures

1. To report known or suspected child abuse, any employee (as defined above) shall report by telephone to the local child protective agency.

Butte County Child Protection Services
P.O. Box 1640, Oroville, CA 95944
(530) 538-7617

The telephone report must be made immediately, or as soon as practically possible, upon suspicion. This report will include:

- a. The name of the person making the report
- b. The name of the child
- c. The present location of the child
- d. The nature and extent of any injury
- e. Any other information requested by the child protective agency, including the information that led the mandated reporter to suspect child abuse

When the verbal report is made, the mandated reporter shall note the name of the official contacted, the date and time contacted, and any instructions or advice received.

2. Within 36 hours of making the telephone report, the mandated reporter shall complete and mail to the local child protective agency a written report which includes a completed Department of Justice form (DOJ SS 8572).

Mandated reporters may obtain copies of the above form either from the district or the local child protective agency.

Instructions are included on the form, and reporters may ask the site administrator for help in completing and mailing it; however, the mandated reporter is personally responsible for ensuring that the written report is correctly filed.

CHILD ABUSE REPORTING PROCEDURES (continued)

3. Employees reporting child abuse to a child protective agency are encouraged, but not required, to notify the site administrator or designee as soon as possible after the initial verbal report by telephone. When so notified, the site administrator shall inform the Superintendent or designee.

Administrators so notified shall provide the mandated reporter with any assistance necessary to ensure that reporting procedures are carried out in accordance with law and district regulations. At the mandated reporter's request, the principal may assist in completing and filing these forms.

If the mandated reporter does not disclose his/her identity to a district administrator, he/she shall at least provide or mail a copy of the written report to the district without his/her signature or name.

Legal Responsibility and Liability

1. Mandated reporters have absolute immunity. School employees required to report are not civilly or criminally liable for filing a required or authorized report of known or suspected child abuse.
2. If a mandated reporter fails to report an instance of child abuse which he/she knows to exist or reasonably should know to exist, he/she is guilty of a misdemeanor punishable by confinement in jail for up to six months, a fine of up to \$1,000, or both. The mandated reporter may also be held civilly liable for damages resulting from any injury to the child after a failure to report.
3. When two or more persons who are required to report have joint knowledge of a suspected instance of child abuse, and when they so agree, the telephone report may be made by either of them and a single report made and signed by that person. However, if any person knows or should know that the designated person failed to make the report, that person then has a duty to do so.
4. The duty to report child abuse is an individual duty and no supervisor or administrator may impede or inhibit such reporting duties. Furthermore, no person making such a report shall be subject to any sanction.

Victim Interviews

Upon request, a child protective agency representative may interview a suspected victim of child abuse during school hours, on school premises, concerning a report of suspected child abuse that occurred within the child's home. The child shall be given the choice of being interviewed in private or in the presence of any adult school employee or volunteer aide selected by the child. (Penal Code 11174.3)

CHILD ABUSE REPORTING PROCEDURES (continued)

A staff member or volunteer aide selected by a child may decline to be present at the interview. If the selected person accepts, the principal or designee shall inform him/her, before the interview takes place, of the following legal requirements:

1. The purpose of the selected person's presence at the interview is to lend support to the child and enable him/her to be as comfortable as possible.
2. The selected person shall not participate in the interview.
3. The selected person shall not discuss the facts or circumstances of the case with the child.
4. The selected person is subject to the confidentiality requirements of the Child Abuse and Reporting Act, a violation of which is punishable as specified in Penal Code 11167.5.

If a staff member agrees to be present, the interview shall be held at a time during school hours when it does not involve an expense to the school. (Penal Code 11174.3)

Release of Child to Peace Officer or Child Protective Services Agent

When a child is released to a peace officer or child protective services agent and taken into custody as a victim of suspected child abuse, the Superintendent or designee and/or principal shall not notify the parent/ guardian as required in other instances of removal of a child from school, but rather shall provide the peace officer or agent with the address and telephone number of the child's parent/guardian. It is the responsibility of the peace officer or agent to notify the parent/guardian of the situation. (Education Code 48906)

Peace officers and child protective services agents will be asked to sign an appropriate release or acceptance of responsibility form.

(cf. 5145.11 - Questioning and Apprehension)

When School Employees are Accused of Child Abuse

Regardless of who child abusers may be, the major responsibilities of mandated reporters are to 1) identify incidents of suspected child abuse, and 2) comply with laws requiring the reporting of suspected abuse to the proper authorities. Determining whether or not the suspected abuse actually occurred is not the responsibility of the school employee. Such determination and follow-up investigation will be made by a child protective agency.

Pending the outcome of an investigation by a child protective agency and before formal charges are filed, the employee may be subject to reassignment or a paid leave of absence.

CHILD ABUSE REPORTING PROCEDURES (continued)

Upon filing formal charges or upon conviction, the district may take disciplinary action in accordance with law, district policies, regulations and/or collective bargaining agreements. The Superintendent or designee shall seek legal counsel in connection with either the suspension or dismissal of the employee.

(cf. 4117.4 - Dismissal)

(cf. 4118 - Suspension/Disciplinary Action)

(cf. 4218 - Dismissal/Suspension/Disciplinary Action)

SCHOOL-BASED HEALTH AND SOCIAL SERVICES

Because good physical and mental health is critical to a student's ability to learn, the Governing Board believes that all students should have access to comprehensive health and social services. The Board desires to collaborate with local health, mental health and social service providers in order to offer integrated services at or near district schools.

(cf. 1020 - Youth Services)

The district may provide preventive, diagnostic, therapeutic and/or rehabilitative health services on an outpatient basis at school sites. The district shall serve as a Medi-Cal provider to the extent feasible, shall comply with all related legal requirements and may be reimbursed to the extent allowed under the Medi-Cal billing option for local educational agencies.

(cf. 5131.6 - Alcohol and Other Drugs)

(cf. 5141.21 - Administering Medication and Monitoring Health Conditions)

(cf. 5141.22 - Infectious Diseases)

(cf. 5141.24 - Specialized Health Care Services)

(cf. 5141.26 - Tuberculosis Testing)

(cf. 5141.3 - Health Examinations)

(cf. 5141.31 - Immunizations)

(cf. 5148 - Child Care and Development)

(cf. 6159 - Individualized Education Program)

(cf. 6164.6 - Identification and Education under Section 504)

Legal Reference: (see next page)

SCHOOL-BASED HEALTH AND SOCIAL SERVICES (continued)

Legal Reference:

EDUCATION CODE

8800-8807 *Healthy Start support services for children*

49423.5 *Specialized physical health care services*

56340 *Meetings to develop, review and revise individualized education programs*

GOVERNMENT CODE

95020 *Individualized family service plan*

WELFARE AND INSTITUTIONS CODE

14132.06 *Covered benefits; health services provided by local educational agencies*

CODE OF REGULATIONS, TITLE 17

2951 *Testing standards*

CODE OF REGULATIONS, TITLE 22

51051 *Providers of services*

51096 *Speech pathology*

51098 *Audiological services*

51190.1 *Local educational agency eligible beneficiary*

51190.2 *Local educational agency provider*

51190.3 *Local educational agency practitioner*

51190.4 *Local educational agency services*

51190.5 *Managed care plan*

51231.2 *Wheelchair van requirements*

51270 *Local educational agency provider; conditions for participation*

51309 *Psychology*

51323 *Medical transportation services*

51351 *Targeted case management services*

51360 *Local educational agency; types of services*

51491 *Local educational agency eligibility for payment*

51535.5 *Reimbursement to local educational agency providers*

Management Resources:

CDE PUBLICATIONS

LEA Medi-Cal Billing Option, 4/25/94

WEB SITES

CDE: <http://www.cde.ca.gov>

CSBA: <http://www.csba.org>

SCHOOL-BASED HEALTH AND SOCIAL SERVICES

The following services may be provided to students by the district 22 CCR 51360)

1. Health and mental health evaluation and education, including:
 - a. Nutritional assessment and nutrition education, consisting of assessments and nonclassroom nutrition education based on the outcome of the nutritional health assessment (diet, feeding, laboratory values and growth)
 - b. Vision assessment, consisting of examination of visual acuity at the far point conducted by means of the Snellen Test
 - c. Hearing assessment, consisting of testing for auditory impairment using at-risk criteria and appropriate screening techniques as defined in 17 CCR 2951(c)
 - d. Developmental assessment, consisting of examination of the developmental level by review of developmental achievement in comparison with expected norms for age and background
 - e. Assessment of psychosocial status, consisting of appraisal of cognitive, emotional, social and behavioral functioning and self-concept through tests, interviews and behavioral evaluations
 - f. Health education and anticipatory guidance appropriate to age and health status, consisting of nonclassroom health education and anticipatory guidance based on age and developmentally appropriate health education

(cf. 5141.3 - Health Examinations)

2. Physical therapy, which consists of services as set out in 22 CCR 51309(b) when provided by a local educational agency (LEA) practitioner to an LEA eligible beneficiary
3. Occupational therapy services as set out in 22 CCR 51309(c) when provided by a LEA practitioner to an LEA eligible beneficiary
4. Speech pathology services as defined in 22 CCR 51096 and audiology services as defined in 22 CCR 51098 when provided by a LEA practitioner to an LEA eligible beneficiary
5. Psychology and counseling services consisting of diagnosis and psychological counseling of identified mental health, substance abuse, behavioral adjustment or social problems

SCHOOL-BASED HEALTH AND SOCIAL SERVICES (continued)

(cf. 5131.6 - Alcohol and Other Drugs)

6. Preventive and medically necessary nursing services rendered at the school site and services for accompanying the student off campus for health services specified as medically necessary in the individual's Individualized Education Program (IEP), as defined in Education Code 56340, Individualized Family Service Plan (IFSP), as set forth in Government Code 95020 or Individualized Health and Support Plan (IHSP), as set forth in 22 CCR 51535.5

(cf. 5141.26 - Tuberculosis Testing)

(cf. 5141.31 - Immunizations)

(cf. 6159 - Individualized Education Program)

7. School health aide services consisting of the direct provision of specialized physical health care services at the school site and services for accompanying the student off campus for health services specified as medically necessary in the individual's IEP, IFSP or IHSP

Health care aides who provide specialized physical health care services pursuant to Education Code 49423.5 shall be under the supervision of a licensed physician and surgeon, a registered credentialed school nurse or a certified public health nurse. All other individuals performing health and social services shall provide documented evidence of being licensed, certified, registered or otherwise credentialed to practice in California. They shall provide only those services which are within their appropriate scope of practice. (22 CCR 51190.3, 51270, 51491)

(cf. 5141.24 - Specialized Health Care Services)

8. Medical transportation and associated mileage only on those days when the student receives a Medi-Cal eligible service described in 22 CCR 51323(a) and 51360(b)
9. Targeted case management services for children with an IEP, an IFSP or an IHSP
10. Other services which may not be funded by Medi-Cal.

(cf. 5141.32 - Child Health and Disability Prevention Program)

SAFETY

The Governing Board places a high priority on safety and on the prevention of student injury. Principals and staff are responsible for the conduct and safety of students from the time they come under school supervision until they leave school supervision, whether on school premises or not. The Superintendent or designee shall establish regulations and procedures as necessary to protect students from dangerous situations.

- (cf. 0450 - Comprehensive Safety Plan)*
- (cf. 3514 - Environmental Safety)*
- (cf. 3515.2 - Disruptions)*
- (cf. 3516 - Emergencies and Disaster Preparedness Plan)*
- (cf. 5131.1 - Bus Conduct)*
- (cf. 5141 - Health Care and Emergencies)*
- (cf. 5141.1 - Accidents)*
- (cf. 5142.2 - Crossing Guards)*
- (cf. 5144 - Discipline)*
- (cf. 6145.2 - Athletic Competition)*
- (cf. 6161.3 - Toxic Art Supplies)*

Playgrounds

The Board recognizes that playgrounds present children with visible challenges which they may choose to take in order to test their skills and courage. Playground equipment shall be carefully selected and installed, so that while presenting such challenges, it minimizes accidents and present no unseen hazards. Safety shall receive prime consideration whenever playgrounds are planned or upgraded.

The principal or designee shall ensure that playgrounds and other school facilities are regularly inspected, well maintained, and adequately supervised whenever in use by students during the school day or at school-sponsored activities. The principal or designee shall establish playground safety rules.

- (cf. 6143 - Courses of Study)*

Legal Reference: (see next page)

SAFETY (continued)

Legal Reference:

EDUCATION CODE

17280-17315 Approvals (Field Act)

32001 Fire alarms and drills

32020 School gates; entrances for emergency vehicles

32030-32034 School eye safety

32040 First aid equipment

32050 Hazing

38139 Missing children; posting of information

44807 Duty of teachers concerning conduct of pupils to hold them accountable for conduct to and from schools, on playgrounds, and during recess

44808 Exemption from liability when students are not on school property

44808.5 Permission for pupils to leave school grounds; notice (high school)

49068.5 Missing children; transfers

49341 Need for safety in school science laboratories

51202 Instruction in personal and public health and safety

GOVERNMENT CODE

810-996.6 California Tort Claims Act, especially:

815 Liability for injuries generally; immunity of public entity

835 Conditions of liability

4450-4458 Access to public buildings by physically handicapped persons

HEALTH AND SAFETY CODE

115725-115750 Playground Equipment

115775-115800 Wooden Playground Safety

PENAL CODE

14200-14213 Violent crime information center

PUBLIC RESOURCES CODE

5411 Purchase of equipment usable by physically handicapped persons

CODE OF REGULATIONS, TITLE 5

202 Exclusion of pupils with a contagious disease

5531 Supervision of social activities

5552 Playground supervision

5570 When school shall be open and teachers present

14103 Bus driver; authority over pupils

CODE OF REGULATIONS, TITLE 24

4-314 Construction on school sites

COURT DECISIONS

Perna v. Conejo Valley Unified School District (1983) 143 Cal. App. 3d 292

Hoyem v. Manhattan Beach City School District (1978) 22 Cal. 3d 508

Dailey v. Los Angeles Unified School District (1970) 2 Cal. 3d 741, 747

Management Resources:

OFFICE OF THE STATE ARCHITECT ADVISORIES

0400.90 Death and Injury from Collapse of Free-Standing Walls

SAFETY

Supervision

The principal of each school shall ensure that certificated employees, teacher aides or yard aides supervise the conduct and safety, and direct the play, of students of the school who are on school grounds before and after school, during recess, and during other intermissions.

Teachers shall be present at their respective rooms and open them to admit students not less than 30 minutes before the time when school starts, or as specified in the collective bargaining agreement.

Safety rules for the use of facilities and equipment shall include rules on acceptable playground behavior and on the proper use of play apparatus in elementary schools.

School staff shall train students on the rules and include safety instruction in their lesson plans when appropriate. Copies of the rules shall be sent to parents/guardians and be readily available at the school at all times.

The principal or designee shall:

1. Clearly identify supervision zones on the playground and require that supervisors remain outside at a location from which they can observe their entire zone of supervision.
2. Require that all individuals supervising students remain alert in spotting dangerous conditions and report any such conditions to the principal or designee promptly and in writing.
3. Establish emergency procedures that ensure swift response to accidents, fighting, and situations that could become dangerous, such as overcrowding or unusual gatherings of students.

The Superintendent or designee shall ensure that teachers, teacher aides, yard aides and volunteers who supervise students receive training in the above safety practices and in supervisory techniques which will help them to forestall problems and resolve conflicts.

When determining the ratio of playground supervisors to students, the Superintendent or designee shall consider the size of the playground area, the number of blind spots that are not immediately visible, the age and gender of the students, and the general nature of their behavior.

Release of Student to Adult

Students shall be released during the school day in the custody of an adult only if:

SAFETY (continued)

1. The adult is the student's parent/legal guardian.

(cf. 5021 - Noncustodial Parents)

2. The adult has appropriate identification and the verified authorization of the student's parent/legal guardian.

3. The adult is a properly authorized law officer acting in accordance with law.

(cf. 5145.11 - Questioning and Apprehension)

4. The adult is taking the student to emergency medical care, at the request of the principal or designee.

(cf. 5141.4 - Child Abuse Reporting Procedures)

Missing Children

In order to enable district staff to assist in locating missing children, the Superintendent or designee shall ensure that Department of Justice information on missing children is posted at every school. In schools maintaining elementary grades, this information shall be posted in areas restricted to adult use. (Education Code 38139)

Elementary school principals are urged to review missing children's pictures whenever a new student enrolls or transfers into the school. (Education Code 49068.5)

Playground Design, Equipment and Maintenance

Teachers, teacher aides, maintenance staff, parents/guardians and students are encouraged to contribute their ideas for making the playground as safe as possible.

Playgrounds should be designed for ease of supervision and should have:

1. Clearly defined entry and exit routes that lead to and from play areas without crossing other major activities
2. Fences or other barriers limiting vehicle access to play areas
3. Proper water drainage
4. Bicycle racks that are fenced and located where easily visible
5. Safety rules posted at the entrance and near play equipment

SAFETY (continued)

Playgrounds shall provide access for the handicapped in accordance with law.

The age, size and ability of the students who will use playground equipment shall determine the choice of equipment, the height of platforms and slides, and the diameter of climbing bars. Par courses and other adult equipment that is inappropriate for student use shall not be placed at elementary schools.

Playground equipment shall be installed by the manufacturer, by the manufacturer's representative, or by district maintenance staff under the direct supervision of the manufacturer's representative. A signed statement shall be secured from the manufacturer's representative stating that the equipment has been properly installed in accordance with the manufacturer's specifications.

The following guidelines shall be observed when playground equipment is installed:

1. Concrete footings shall be kept from six to 12 inches below finished grade.
2. Appropriate cushioning material shall be installed under the equipment before it is used.
 - a. Except for tetherball poles and basketball standards, playground equipment shall not be installed over blacktop.
 - b. Cushioning material shall be placed in all areas where a student might fall when using the equipment.
 - c. Cushioning material shall be maintained at the depth recommended by the manufacturer, always at least eight inches.
 - d. Cushioning material shall be resupplied on a regular basis to ensure adequate depth at all times, including vacation breaks.
3. The equipment and its cushioning border shall be set back at least eight feet from other equipment. Swings shall be set back at least two times the crossbar height, both front and back.
4. Ball boards over six feet high shall be approved by the Office of the State Architect. (24 CCR 4-314)

Maintenance staff shall:

1. Rake cushioning material daily and remove foreign objects.
2. Regularly clean cushioning material from areas surrounding the cushioned area so as to minimize slipping.

SAFETY (continued)

3. Regularly inspect playground equipment and fences to ensure that all parts are in good condition.
 - a. Check wooden structures for holes, cracks, splinters, and possible rot at ground level.
 - b. Look for protruding nails or sharp edges and repair as needed.

FINGERPRINTING PROGRAM

In order to facilitate the identification and location of missing children, the Governing Board may offer a fingerprinting program for all entering kindergarten children and all students newly enrolled in the district. The district shall advise parents/guardians of the availability of the program when students are first enrolled.

Parents/guardians of children who are fingerprinted may be charged a fee calculated to reimburse the district only for actual costs associated with the program.

Written parent/guardian consent shall be required prior to a student's fingerprinting. All copies of the student's fingerprints shall be given to the parent/guardian. These copies are all the property of the parent/guardian and none shall be retained as part of student records.

The Superintendent or designee shall implement this service in accordance with legal requirements. He/she shall encourage student participation and ensure the privacy of student records.

Legal Reference:

EDUCATION CODE

32390 Voluntary program for fingerprinting students

48980 Parental notification of district programs, rights and responsibilities

INSURANCE

A group student accident insurance plan shall be made available on a voluntary basis to every student registered in the district. The specific plan shall be approved by the Governing Board and shall specify that the insurance agent assume all administrative processes. (Education Code 49470, 49472)

The Board authorizes the distribution of literature concerning voluntary student insurance during the first week of every school year. All communications concerning the insurance shall be directed to the insurance company by the student's parent/guardian.

Students and parents/guardians shall be notified at the beginning of each school year that the district does not provide or make available medical and hospital care or insurance for students who are injured while participating in physical or athletic activities.

(cf. 6153 - School-Sponsored Trips)

Nonteam Athletic Activities

Schools shall not permit the following activities on campus by individuals or by groups nor shall school groups be permitted to engage in them:

1. Trampolining
2. Scuba Diving
3. Skateboarding
4. Hang Gliding
5. Sailing
6. Water Skiing
7. Motorcycling
8. Rifle Club
9. Horseback Riding
10. Rodeo Events

If the following activities are deemed advisable by individual schools, they may be engaged in under school sponsorship and administrative procedures only if each participant is covered by an insurance policy providing the same coverage as that required for interscholastic athletic team members:

INSURANCE (continued)

1. Snow Trips
2. Bicycling
3. Backpacking
4. Breakdancing (headspin specifically prohibited)
5. Other activities determined by the school principal

The activity sponsor shall verify that each participant has the required coverage. The cost of coverage shall be borne by the students, the student body, or by a combination of both.

(cf. 3514 - Environmental Safety)
(cf. 3530 - Risk Management/Insurance)
(cf. 6145.2 - Athletic Competition)

Legal Reference:

EDUCATION CODE

32220-32224 Insurance for athletic teams

33353.5 Interscholastic federation; insurance program; nontransaction of insurance

49470-49474 District medical services and insurance

51760 Insurance - work experience programs

52530 Insurance for healing arts program students

DISCIPLINE

The Governing Board desires to prepare youth for responsible citizenship by fostering self-discipline and personal responsibility. The Board perceives that good planning, a good understanding of each child, high expectations for student behavior, effective classroom management, and parent involvement can minimize the need for discipline. Teachers shall use positive conflict resolution techniques and avoid unnecessary confrontations. When misconduct occurs, staff shall make every effort to identify and correct the causes of the student's behavior.

Board policies and regulations shall delineate acceptable student conduct and provide the basis for sound disciplinary practices. Each school shall develop disciplinary rules in accordance with law to meet the school's individual needs.

Staff shall enforce disciplinary rules fairly and consistently, without discrimination.

(cf. 0410 - Nondiscrimination in District Programs and Activities)
(cf. 5145.3 - Nondiscrimination/Harassment)

In order to maintain safe and orderly environments, the Board shall give employees all reasonable support with respect to student discipline. If a disciplinary strategy is ineffective, another strategy shall be employed. Continually disruptive students may be assigned to alternative programs or removed from school.

(cf. 4158/4258/4358 - Employee Security)
(cf. 5131 - Conduct)
(cf. 5142 - Safety)
(cf. 5144.1 - Suspension and Expulsion/Due Process)
(cf. 6159.4 - Behavioral Interventions for Special Education Students)
(cf. 6164.5 - Student Study Teams)

The Superintendent or designee shall provide professional development as necessary to assist staff in developing classroom management skills and implementing effective disciplinary techniques.

(cf. 4131 - Staff Development)
(cf. 4231 - Staff Development)
(cf. 4331 - Staff Development)

Legal Reference: (see next page)

DISCIPLINE (continued)

Legal Reference:

EDUCATION CODE

35146 *Closed sessions*

35291 *Rules*

35291.5 *School-adopted discipline rules*

35291.7 *School-adopted discipline rules: additional employees*

37223 *Weekend classes*

44807.5 *Restriction from recess for disciplinary purposes*

48630-48644.5 *Opportunity schools*

48900-48925 *Suspension and expulsion*

48980-48985 *Notification of parents or guardians*

49000-49001 *Prohibition of corporal punishment*

49330-49334 *Injurious objects*

CODE OF REGULATIONS, TITLE 5

307 *Participation in school activities until departure of bus*

353 *Detention after school*

Management Resources:

CDE PROGRAM ADVISORIES

1023.88 *Corporal Punishment, CIL: 88/9-5*

110.89 *Physical Exercise as Corporal Punishment, CIL 89/9-3*

DISCIPLINE**Site-Level Rules**

Rules for student discipline shall be developed at each school site and filed with the district office. These rules shall be adopted jointly by the principal or designee and a representative selected by classroom teachers employed at the school. The views of administrators, teachers, security personnel, parents/guardians and secondary school students shall be obtained when the rules are developed. The rules shall be consistent with law, Governing Board policy and district regulations; they shall be revised as necessary and shall undergo the site-level review and adoption process at least every four years. (Education Code 35291.5)

All avenues of discipline provided in policy, regulation and law may be used in developing site-level rules. These include but are not limited to advising and counseling students, conferring with parents/guardians, detention during and after school hours, and the use of alternative educational environments, suspension and expulsion.

Corporal Punishment

Corporal punishment shall not be used as a disciplinary measure against any student. Corporal punishment includes the willful infliction of, or willfully causing the infliction of, physical pain on a student. (Education Code 49000, 49001)

For purposes of this policy, corporal punishment does not include an employee's use of force that is reasonable and necessary to protect the employee, students, staff or other persons or to prevent damage to district property, or to obtain possession of weapons or other dangerous objects within the control of the student. (Education Code 49001)

Community Service

Except when suspension or expulsion is required by law, the Superintendent, principal or principal's designee, at his/her discretion, may require a student to perform community service on school grounds during nonschool hours instead of imposing other disciplinary action. Such service may include, but is not limited to, outdoor beautification, campus betterment, and teacher or peer assistance programs. (Education Code 48900.6)

Recess Restriction

Certificated staff may restrict a student's recess time under the following conditions when he/she believes that this action is the most effective way to bring about improved behavior:

1. The student shall be given adequate time to use the restroom and get a drink or eat lunch, as appropriate.
2. The student shall remain under a certificated employee's supervision during the period of detention.

DISCIPLINE (continued)

3. Teachers shall inform the principal of any recess restrictions they impose in excess of three days.
4. If a child is “benched” or restricted at any recess or lunch recess for more than three consecutive days, the teacher or yard duty teacher shall report the restrictions to the principal or designee.

Detention After School

Students may be detained for up to one hour after the close of the maximum school day under the following conditions:

1. A student who is transported by school bus shall be detained only until the time when the bus departs. (5 CCR 307, 353)
2. A student who is not transported by school bus shall be detained only after his/her parent/guardian has been notified of the day and amount of time involved.
3. The student shall remain under the supervision of a certificated employee during the period of detention.

Notice to Parents/Guardians and Students

The principal of each school shall ensure that students and parents/guardians are notified in writing of all Board policies, administrative regulations and individual school rules related to discipline at the beginning of each school year. Transfer students and their parents/guardians shall be so advised upon enrollment.

The notice shall state that these rules and regulations are available on request at the principal's office in all district schools.

(cf. 5145.6 - Parental Notifications)