

**BABYLON UNION FREE SCHOOL DISTRICT
50 RAILROAD AVENUE
BABYLON, NEW YORK 11702**

**BABYLON SCHOOL BOARD REGULAR BUSINESS MEETING
AGENDA
JUNE 6, 2016**

Meeting protocol: Please state your name when addressing the Board of Education.

- I. Call to Order - 6:30 p.m.
- II. Executive Session
It is anticipated that upon a majority vote of the total membership of the Board, a motion to meet in Executive Session to discuss specific collective bargaining, personnel issues, and/or other specific matters appropriate for executive session in accordance with the Open Meeting Law will be considered. Following executive session the Board will reconvene in the Babylon Junior-Senior High School library at approximately 7:30 p.m.
- III. Pledge of Allegiance - 7:30 p.m.
- IV. Approval of Minutes of the Regular Business Meeting of May 9, 2016, Annual School District Meeting of May 17, 2016, Special Meeting of May 17, 2016, Work/Study Meeting of May 23, 2016 and Special Meeting of May 31, 2016.
- V. Approval of Treasurer's and Business Office Financial Reports and Extra Curricular Fund Report for April 2016 and Internal Claims Audit Report for March 2016 and April 2016
- VI. Superintendent's Report
 - a. Student and Staff Recognition
 - b. Student Delegate Report
 - c. News & Updates Around the District
- VII. Committee Reports
 - a. Audit Committee
 - b. Finance Committee
 - c. Buildings & Grounds
 - d. Technology Committee
 - e. Curriculum Committee
 - f. Policy Committee
- VIII. Board Agenda Items
 - a. Questions from Visitors on Agenda Items - Please approach the podium and state your name.
 - b. Discussion
- IX. New Business
 1. **REORGANIZATION MEETING/REGULAR MEETING: RESOLVED**, that upon the recommendation of the Superintendent of Schools, the Reorganization Meeting of the Board of Education of the Babylon Union Free School District be scheduled for 7:00 p.m. on Monday, July 11, 2016, and **BE IT FURTHER RESOLVED**, that the Regular Meeting of the Board of Education of the Babylon UFSD be held immediately following the Reorganization Meeting on July 11, 2016.
 2. **TENURE APPOINTMENT: RESOLVED**, that upon the recommendation of the Superintendent of Schools, the Board of Education grants tenure to Steve Goldberg as a Principal effective July 1, 2016.
 3. **TENURE APPOINTMENT: RESOLVED**, that upon the recommendation of the Superintendent of Schools, the Board of Education grants tenure to Lisa Consolo as a District Director of Special Education effective July 1, 2016.
 4. **TENURE APPOINTMENT: RESOLVED**, that upon the recommendation of the Superintendent of Schools, the Board of Education grants tenure to Michael Birnbaum as an English 7-12 teacher effective September 1, 2016.
 5. **TENURE APPOINTMENT: RESOLVED**, that upon the recommendation of the Superintendent of Schools, the Board of Education grants tenure to Daisy Holzmacher as a Reading teacher effective September 1, 2016.

6. **TENURE APPOINTMENT: RESOLVED**, that upon the recommendation of the Superintendent of Schools, the Board of Education grants tenure to Stephanie Kiriakopoulos as an elementary K-6 teacher effective September 1, 2016.
7. **TENURE APPOINTMENT: RESOLVED**, that upon the recommendation of the Superintendent of Schools, the Board of Education grants tenure to Lisa Necroto as an elementary teacher effective September 1, 2016.
8. **TENURE APPOINTMENT: RESOLVED**, that the Board of Education grants tenure to Debra Roberto as a special education teacher effective September 1, 2016.
9. **DONATION: RESOLVED**, that upon the recommendation of the Superintendent of Schools, the Board of Education accepts the donation of \$5,000.00 from Theresa Santmann for participation in the Babylon Village Art Festival.
10. **DONATION: RESOLVED**, that upon the recommendation of the Superintendent of Schools, the Board of Education accepts the donation of a Friendship Bench valued at \$500.00 and two water fountains from the Babylon K-6 PTA, with appreciation for these generous gifts.
11. **PROBATIONARY PHYSICAL EDUCATION AND HEALTH TEACHER K-12: RESOLVED**, that upon the recommendation of the Superintendent of Schools, the Board of Education approves the probationary appointment of Melissa Pascarella as a physical education teacher K-12 and a health teacher K-12, effective 9/1/2016 through 9/1/2020*. Compensation for this assignment is to be at Step 2/MA of the 2016-2017 Babylon Teachers' Association salary schedule. (\$62,581). Ms. Pascarella holds certificates in Physical Education K-12, Health Education K-12.*
12. **PER DIEM SUBSTITUTE TEACHER APPOINTMENTS: RESOLVED**, that upon the recommendation of the Superintendent of Schools, the Board of Education approves the appointments of Kristin Mees and Brigid Sheehan as per diem substitute teachers effective June 7, 2016 to June 30, 2016. Compensation for these assignments to be \$110.00/day.
13. **SCHOOL COUNSELING INTERNS: RESOLVED**, that on the recommendation of the Superintendent of Schools, the Board of Education approves Christina Hinojosa and Jasmine Swope as School Counseling Interns-LIU for the fall 2016.
14. **FIRST READING OF POLICY 1230: RESOLVED**, that upon the recommendation of the Superintendent of Schools, the Board of Education conduct a first reading of policy 1230-Public Participation at Board Meetings and **BE IT FURTHER RESOLVED**, that the Board of Education waive the formal first reading of policy 1230-Public Participation at Board Meetings, as attached.
15. **FIRST READING OF POLICY 1400: RESOLVED**, that upon the recommendation of the Superintendent of Schools, the Board of Education conduct a first reading of policy 1400-Public Complaints and **BE IT FURTHER RESOLVED**, that the Board of Education waive the formal first reading of policy 1400-Public Complaints, as attached.
16. **FIRST READING OF POLICY 5300.60: RESOLVED**, that upon the recommendation of the Superintendent of Schools, the Board of Education conduct a first reading of policy 5300.60-Student Searches & Interrogations and **BE IT FURTHER RESOLVED**, that the Board of Education waive the formal first reading of policy 5300.60-Student Searches & Interrogations, as attached.
17. **FIRST READING OF POLICY 5420/5420R: RESOLVED**, that upon the recommendation of the Superintendent of Schools, the Board of Education conduct a first reading of policy 5420/5420-R-Student Health Services and Regulations, and **BE IT FURTHER RESOLVED**, that the Board of Education waive the formal first reading of policy 5420/5420-R-Student Health Services and Regulations, as attached.
18. **FIRST READING OF POLICY 1240: RESOLVED**, that upon the recommendation of the Superintendent of Schools, the Board of Education conduct a first reading of policy 1240-Visitors to the Schools and **BE IT FURTHER RESOLVED**, that the Board of Education waive the formal first reading of policy 1240-Visitors to the Schools, as attached.

19. **SPECIAL EDUCATION COURSE APPROVAL: RESOLVED**, that upon the recommendation of the Superintendent of Schools, the Board of Education approves the implementation of the PAES (Practical Assessment Exploration System) special education course for the 2016-2017 school year.
 20. **STUDENT OVERNIGHT TRIP: RESOLVED**, that upon the recommendation of the Superintendent of Schools, the Board of Education approves overnight student participation for the Chordettes to attend Disney Performing Arts Onstage in Orlando, Florida from December 9-12, 2016.
 21. **TRAINING AGREEMENT: RESOLVED**, that upon the recommendation of the Superintendent of Schools, the Board of Education approves the 2016 Heads Up Football High School Coach Training Agreement between the Babylon Union Free School District and Heads Up Football, LLC.
 22. **CONTRACT AWARD: RESOLVED**, that upon the recommendation of the Superintendent of Schools, the Board of Education awards QG Mechanical, as the lowest responsible bidder for Instructional Space Interior Renovations Mechanical Base Bid No. MC-1 at a total cost of \$288,800.
 23. **CONTRACT AWARD: RESOLVED**, that upon the recommendation of the Superintendent of Schools, the Board of Education award Hirsh and Co., as the lowest responsible bidder for Instructional Space Interior Renovations Plumbing Base Bid No. PC-1 at a total cost of \$83,000.
 24. **CONTRACT AWARD: RESOLVED**, that upon the recommendation of the Superintendent of Schools, the Board of Education award Bancker Electric, as the lowest responsible bidder for Instructional Space Interior Renovations Electrical Base Bid No. EC-1 at a total cost of \$267,000.
 25. **CONTRACT AWARD: RESOLVED**, that upon the recommendation of the Superintendent of Schools, the Board of Education award Bancker Electric, as the lowest responsible bidder for Instructional Space Interior Renovations Electrical/Theatrical Space Base Bid No. TSI-1 at a total cost of \$317,000.
 26. **CONTRACT AWARD: RESOLVED**, that upon the recommendation of the Superintendent of Schools, the Board of Education award Renu, as the lowest responsible bidder for Instructional Space Interior Renovations General Construction Base Bid No. GC-2 at a total cost of \$1,237,590.
 27. **CHANGE ORDER: RESOLVED**, that upon the recommendation of the Superintendent of Schools, the Board of Education approves AIA Document G701/Change Order #2 for work completed at the Babylon Junior-Senior High School with Relle Electric of Bellport, New York in the amount of \$6,351.70, as the net result of changes to the original scope of work and two deduct credits.
 28. **COMMITTEE ON SPECIAL EDUCATION AND COMMITTEE ON PRESCHOOL SPECIAL EDUCATION: RESOLVED**, that upon the recommendation of the Superintendent of Schools, the Board of Education accepts the recommendations from the Committee on Special Education and the Committee on Preschool Special Education for cases dated February 2016 to May 2016.
- X. Other Business:
- XI. Representatives of Organizations - Please approach the podium and state your name.
- XII. Questions from Visitors - Please approach the podium and state your name.
- XIII. Future Board Meetings:
- Regular Business Meeting
Monday, June 20, 2016
7:30 p.m. - BHS Library
- XIV. Adjournment

At the conclusion of the meeting, the Board of Education will hold a reception to honor our tenured staff.

**In order to be eligible for tenure, an individual receiving a probationary appointment as a classroom teacher or building principal shall have received composite or overall annual professional performance review ratings pursuant to Education Law section 3012-c and/or 3012-d of either effective or highly effective in at least three of the four preceding years and if the classroom teacher or building principal receives an ineffective composite or overall rating in the final year of the probationary period he or she shall not be eligible for tenure at that time. Classroom teacher and building principal means a classroom teacher or building principal as such terms are defined in sections 30-2.2 and 30-3.2 of the regulations of the Commissioner of Education.*

PUBLIC PARTICIPATION AT BOARD MEETINGS

The Board of Education encourages public participation on school related matters at regularly scheduled monthly Business Meetings of the Board of Education.

District residents may comment on or question matters related to any agenda item under the appropriate section of the agenda that allows them to do so. District residents may also comment on non-agenda items under the "Other Business" portion of the Business Meeting agenda. The Board will not permit in public session discussion involving individual district personnel or students. District residents wishing to discuss matters involving individual district personnel or students should present their comments and/or concerns to the Superintendent during regular business hours.

District residents at Board of Education meetings must state their names, address and remarks to the President who may direct questions or comments to Board members or other district officials. Board members and the Superintendent shall have the privilege of asking questions of any person who addresses the Board. Unless an extension of time is granted, each speaker will be limited to three minutes.

The President shall be responsible for the orderly conduct of the meeting and shall rule on such matters as the time to be allowed for public discussion and the appropriateness of the subject being presented. The President shall have the right to discontinue any presentation which violates this policy.

All district residents are to conduct themselves in a civil manner. The Board shall not permit obscene language, libelous statements, threat of violence, or statements advocating prejudice or hatred on the basis of race, religion or sex. District residents shall not approach the Board members without permission.

Adoption date: April 2, 2001

Revised date: January 12, 2015

Revised date:

PUBLIC COMPLAINTS

Constructive criticism of the schools, when accepted by a Board of Education in a receptive spirit, may operate to improve the quality of the educational program or to equip the district schools to do their tasks more effectively. Complaints may properly be referred through administrative channels for solution before Board investigation or action. However, no district resident should be denied the right to bring complaints to the Board.

District residents who are concerned over educational matters and issues have the right to expect the impartial presentation of controversial issues, to secure information from school officials, and to file formal protests with the full expectation that they will receive a courteous and prompt reply.

No district resident of the community should be denied the right to bring his or her complaints to the Board. However, the Board should refer complaints back through the proper administrative channels for investigation and possible solution before any action. Comments, suggestions, and constructive criticism about operational matters may also be referred directly to the Superintendent of Schools for appropriate consideration and action. Exceptions may be made when the complaints concern Board actions or Board operations only.

Complaints and grievances are often best handled and resolved as close to their origin as possible, and the professional staff should be given every opportunity to consider the issues and attempt to resolve a problem prior to involvement by the Board. The usual channeling of complaints, especially those involving instruction, discipline, or learning materials, is from teacher to school building administrator to Superintendent to Board. Only in those cases where satisfactory adjustment cannot be made by the Superintendent's office should complaints be submitted to the Board.

The Board may require the Superintendent to report on the disposition of all complaints that were presented to the Board and referred back through the proper channels. For complaints not resolved at the Superintendent's level, the Board may hear evidence or recommendations submitted by the Superintendent. If it deems it advisable, the Board may grant a hearing to the parties.

As a general rule, complaints should be submitted in writing, specifying the action desired or remedy sought.

Individual Board members should be advised to refer district residents making complaints to the appropriate staff member, and to refrain from expressing any judgement until such complaint is submitted to the entire Board.

Adoption date: April 2, 2001

Revised date:

STUDENT SEARCHES AND INTERROGATIONS

The Board of Education is committed to ensuring an atmosphere on school property and at school functions that is safe and orderly. To achieve this kind of environment, any school official authorized to impose a disciplinary penalty on a student may question a student about an alleged violation of law or the district code of conduct. Students are not entitled to any sort of "Miranda"-type warning before being questioned by school officials, nor are school officials required to contact a student's parent before questioning the student. However, school officials will tell all students why they are being questioned.

The Board authorizes the Superintendent of Schools, Building Principals, the school nurse and district security officials to conduct searches of students and their belongings if the authorized school official has reasonable suspicion to believe that the search will result in evidence that the student violated the law or the district code of conduct.

An authorized school official may conduct a search of a student's belongings that is minimally intrusive, such as touching the outside of a book bag, without reasonable suspicion, so long as the school official has a legitimate reason for the very limited search.

An authorized school official may search a student or the student's belongings based upon information received from a reliable informant. Individuals, other than the district employees, will be considered reliable informants if they have previously supplied information that was accurate and verified, or they make an admission against their own interest, or they provide the same information that is received independently from other sources, or they appear to be credible and the information they are communicating relates to an immediate threat to safety. District employees will be considered reliable informants unless they are known to have previously supplied information that they knew was not accurate.

Before searching a student or the student's belongings, the authorized school official should attempt to get the student to admit that he or she possesses physical evidence that they violated the law or the district code, or get the student to voluntarily consent to the search. Searches will be limited to the extent necessary to locate the evidence sought.

Whenever practicable, searches will be conducted in the privacy of administrative offices and students will be present when their possessions are being searched.

A. Student Lockers, Desks and other School Storage Places

The rules in this code of conduct regarding searches of students and their belongings do not apply to student lockers, desks and other school storage places. Students have no reasonable expectation of privacy with respect to these places and school officials retain complete control over them. This means that student lockers, desks and other school storage places may be subject to search at any time by school officials, without prior notice to students and without their consent.

B. Treatment of Cell Phones

Administrators are authorized to confiscate student cell phones that are being used in violation of the code of conduct and/or policy 5695, Student Use of Electronic Devices. Administrators are permitted to look at the screen of the cell phone and should request the

student's cooperation to search the cell phone further. Without a student's permission, administrators should not undertake a more extensive search until conferring with the Superintendent or school attorney for guidance.

C. Documentation of Searches

The authorized school official conducting the search shall be responsible for promptly recording the following information about each search:

1. Name, age and grade of student searched.
2. Reasons for the search.
3. Name of any informant(s).
4. Purpose of search (that is, what item(s) were being sought).
5. Type and scope of search.
6. Person conducting search and his or her title and position.
7. Witnesses, if any, to the search.
8. Time and location of search.
9. Results of search (that is, what items(s) were found).
10. Disposition of items found.
11. Time, manner and results of parental notification.

The Principal or the Principal's designee shall be responsible for the custody, control and disposition of any illegal or dangerous item taken from a student. The Principal or his or her designee shall clearly label each item taken from the student and retain control of the item(s), until the item is turned over to the police. The Principal or his or her designee shall be responsible for personally delivering dangerous or illegal items to police authorities.

D. Police Involvement in Searches and Interrogations of Students

District officials are committed to cooperating with police officials and other law enforcement authorities to maintain a safe school environment. Police officials, however, have limited authority to interview or search students in schools or at school functions, or to use school facilities in connection with police work. Police officials may enter school property or a school function to question or search a student or to conduct a formal investigation involving students only if they have:

1. A search or an arrest warrant;
2. Probable cause to believe a crime has been committed on school property or at a school function.
3. Probable cause to believe that a crime is about to be committed on school property or at a school function which will endanger the health and safety of students, faculty, and/or staff.

Before police officials are permitted to question or search any student, the Principal or his or her designee shall first try to notify the student's parent to give the parent the opportunity to be present during the police questioning or search. If the student's parent cannot be contacted prior to the police questioning or search, the questioning or search shall not be conducted, unless the student is 16 years of age or older. The Principal or designee will also be present during any police questioning or search of a student on school property or at a school function.

Students who are questioned by police officials on school property or at a school function will be afforded the same rights they have outside the school. This means, at a minimum:

1. They must be informed of their legal rights.
2. They may remain silent if they so desire.
3. They may request the presence of an attorney.

E. Child Protective Services Investigations

Consistent with the district's commitment to keep students safe from harm and the obligation of school officials to report to child protective services when they have reasonable cause to suspect that a student has been abused or maltreated, the district will cooperate with local child protective services workers who wish to conduct interviews of students on school property relating to allegations of suspected child abuse, and/or neglect, or custody investigations.

All requests by child protective services to interview a student on school property shall be made directly to the Principal. The Principal shall immediately notify the Superintendent of Schools of such communication. The Principal or designee shall set the time and place of the interview. The Principal or designee shall decide if it is necessary and appropriate for a school official to be present during the interview, depending on the age of the student being interviewed and the nature of the allegations. If the nature of the allegations is such that it may be necessary for the student to remove any of his or her clothing in order for the child protective services worker to verify the allegations, the school nurse or other district medical personnel must be present during that portion of the interview. No student may be required to remove his or her clothing in front of a child protective services worker or school district official of the opposite sex.

A child protective services worker may not remove a student from school property without a court order, unless the worker reasonably believes that the student would be subject to danger of abuse if not he or she were not removed from school before a court order can reasonably be obtained. If the worker believes the student would be subject to danger of abuse, the worker may remove the student without a court order and without the parent's consent.

Cross-ref: 5695, Students and Personal Electronic Devices

Ref: *Safford Unified School District #1 et al. v. Redding*, 129 S. Ct. 2633 (2009)
Vassallo v. Lando, 591 F.Supp.2d 172 (E.D.N.Y. (2008)
Phaneuf v. Fraikin 448 F.3rd 591 (2006)
New Jersey v. TLO, 469 U.S. 325 (1985)
In re Gregory, 82 N.Y.2d 588 (1993)
People v. Scott D., 34 N.Y.2d 483 (1974)
People v. Singletary, 37 N.Y.2d 310 (1975))
People v. Overton, 20 N.Y.2d 360 (1969)
M.M. v. Anker, 607 F.2d 588 (2d Cir. 1979)
Opinion of Counsel, 1 EDR 800 (1959)

Adoption date:

STUDENT HEALTH SERVICES

The Board of Education recognizes that good student health is vital to successful learning and acknowledges its responsibility, along with that of parent(s) or guardian(s), to protect and foster a safe and healthful environment for the students.

The school shall work closely with students' families to provide detection and preventive health services. In accordance with law, the school will provide vision, hearing, dental inspection and scoliosis screening. Problems shall be referred to the parent(s) or guardian(s) who shall be encouraged to have their family physician/dentist provide appropriate care.

In order to enroll in school a student must submit a health certificate within 30 calendar days after entering school, and upon entering second, fourth, seventh and tenth grades. The health certificate must describe the condition of the student when the examination was made and must state whether the student is in a fit condition of health to permit his or her attendance at the district's schools. The health certificate must also state the student's body mass index (BMI) and weight status category. The examination, which must conform to state requirements, must have been conducted no more than 12 months before the first day of the school year in question. If a student is unable to furnish the health certificate, the school will provide a physical examination by a licensed provider. Health examinations shall also be provided prior to student participation in strenuous physical activity and periodically throughout a sports season as necessary and for all students who need work permits. A request for exemption from the physical examination, or the requirement to provide a health certificate, must be made in writing to the school principal or designee, who may require documents supporting the request. The only basis for exemption is a claim that the physical examination is in conflict with the parent or guardian's genuine and sincere religious belief.

In order to enroll in school, students must also furnish documentation of required immunizations against certain communicable diseases, as set forth in state law and regulations, unless exempted from immunizations for medical or religious reasons as permitted by state law and regulation.

The Board recognizes that the State of New York may authorize and require the collection of data from health certificates in furtherance of tracking and understanding health care issues that affect children. The Board supports these efforts and expects administrators to cooperate and to observe the appropriate laws and regulations in carrying out those responsibilities, including those that relate to student privacy.

In addition, students will be asked to provide a dental health certificate when they enroll in school and in accordance with the same schedule as the health certificate.

A permanent student health record shall be part of a student's cumulative school record and should follow the student from grade to grade and school to school along with his/her academic record. This record folder shall be maintained by the school nurse.

Schools shall also provide emergency care for students in accidental or unexpected medical situations. Each school in the district will include in its emergency plan a protocol for responding to health care emergencies, including anaphylaxis, and head injury. Parents/guardians will be notified of any emergency medical situation as soon as is practicable. Parents/guardians will receive notification of non-emergent medical situations that have been reported to the nurse in a timely manner.

Communicable Diseases

It is the responsibility of the Board to provide all students with a safe and healthy school environment. To meet this responsibility, it is sometimes necessary to exclude students with contagious and infectious diseases, as defined in the Public Health Law, from attendance in school. Students will be excluded during periods of contagion for time periods indicated on a chart developed by the school nurse.

During an outbreak of these communicable diseases, if the Commissioner of Health or his/her designee so orders, the district will exclude students from school who have an exemption from immunization or who are in the process of obtaining immunization in accordance with regulation of the Commissioner of Health, 10 NYCRR66-1.10.

It is the responsibility of the Superintendent of Schools, working through district health personnel, to enforce this policy and to contact the county or local health department when a reportable case of a communicable disease is identified in the student or staff population.

Administering Medication to Students

Neither the Board nor district staff members shall be responsible for the diagnosis or treatment of student illness. The administration of prescribed medication to a student during school hours shall be permitted only when failure to take such medicine would jeopardize the health of the student, or the student would not be able to attend school if the medicine were not made available to him/her during school hours, or where it is done pursuant to law requiring accommodation to a student's special medical needs (e.g., Section 504 of the Rehabilitation Act of 1973). "Medication" will include all medicines prescribed by an authorized medical provider.

Before any medication may be administered to or by any student during school hours, the Board requires:

1. the written request of the parent(s) or guardian(s), which shall give permission for such administration and relieve the Board and its employees of liability for administration of medication; and
2. the written order of the prescribing authorized medical provider, which will include (a) the student's name and date of birth; (b) the name of the medication; (c) the purpose of the medication; (d) the dosage and route of administration; (e) the frequency and time at which or the special circumstances under which medication shall be administered; (f) the period for which medication is prescribed; (g) the date the order was written; (h) the possible side effects of the medication; and (i) the prescribing medical provider's name, title, signature, and phone number.
3. that in order for a student to carry and use a rescue inhaler, an epinephrine auto-injector, insulin, or glucagon and associated testing supplies, written permission must be provided both by the parent and the prescribing authorized medical provider in accordance with state law and regulation.

The school nurse may request additional information, such as self-administration orders, diagnosis, and/or potential adverse reactions. However, medication delivery should not be delayed pending additional information unless such information is essential to the safe administration of the medication, as determined by the school nurse or district physician.

Students are allowed to carry and apply parentally provided sunscreen without a prescription from a medical provider, assuming that the sunscreen is FDA approved and that the sunscreen is not treating a medical condition. Parents need to provide the district with written permission for students to use sunscreen. In addition, parents are responsible for providing the sunscreen they would like their child to use at school.

Permission slips and medical orders shall be kept on file in the office of the school nurse.

Life-Threatening Allergies and Anaphylaxis Management

The Board recognizes its role and responsibility in supporting a healthy learning environment for all students, including those who have, or develop, life-threatening allergies. The district will work cooperatively with the student, their parent/guardian and healthcare provider to allow the child to participate as fully and as safely as possible in school activities. When a student has a known life-threatening allergy reported on their health form or if the district has been informed by the parent of the presence of a life-threatening allergy, the district will assemble a team, which may include the parent, the school nurse, the child's teacher, the building principal and other appropriate personnel, which will be charged with developing an individual health care plan and/or an emergency action plan. The plan(s) will be maintained by the school nurse. The plan(s) will guide prevention and response. If the student is eligible for accommodations based upon the IDEA, Section 504 or the Americans with Disabilities Act, the appropriate procedures will be followed regarding identification, evaluation and implementation of accommodations.

Training

Training to support the fulfillment of staff responsibilities in regard to student health services will be provided as part of the district's ongoing professional development plan and in conformity with Commissioner's regulations.

Regulations

The Superintendent shall develop comprehensive regulations governing student health services. Those regulations shall include the provision of all health services required by law, procedures for the maintenance of health records, and procedures for the administering of medication to students. The Superintendent shall also develop protocols, in consultation with the district medical director and other appropriate district staff, for the management of injury, with particular attention to concussion (see addendum to this policy).

Cross-ref: 4321, Programs for Students with Disabilities
5020.3, Students with Disabilities and Section 504
5280, Interscholastic Athletics
5550, Student Privacy
8130, School Safety Plans and Teams
9700, Staff Professional Development

Ref: Education Law §§310 (provisions for appeal of child denied school entrance for failure to comply with immunization requirements); 901 et seq. (medical, dental and health services, BMI reporting); 916 (student self-administration of rescue inhalers); 916-a (student self-administration of epinephrine); 916-b (students with diabetes); 919 (provide and maintain nebulizers); 921 (epinephrine auto-injectors; training of unlicensed personnel); ; 6909 (emergency treatment of anaphylaxis)
 Public Health Law §§613 (annual survey); 2164 (immunization requirements); 3000-c (collaborative agreements with emergency health care providers)
 8 NYCRR § 64.7 (administration of agents to treat anaphylaxis); § 135.4 (Physical Education); Part 136 (school health services program)
 10 NYCRR Part 66-1 (immunization requirements)
Administration of Medication in the School Setting Guidelines, State Education Department, revised April 2002
Immunization Guidelines: Vaccine Preventable Communicable Disease Control, State Education Department, revised August 2000
Making the Difference: Caring for Students with Life-Threatening Allergies, New York State Department of Health, New York State Education Department, New York Statewide School Health Service Center, June 2008
Concussion Management Guidelines and Procedures, www.nysphsaa.org
New Policy for Stocking Albuterol Metered Dose Inhalers (MDIs), State Education Department, August 2011, www.p12.nysed.gov/sss/schoolhealth/schoolhealthservices/Albutero12011memo.pdf.

Adoption date:

STUDENT HEALTH SERVICES REGULATION

A. Immunization Against Communicable Diseases

Under state Public Health Law 2164, in order to be enrolled in or attend district schools, children must be fully immunized against certain communicable diseases. Those diseases are: poliomyelitis, mumps, measles, diphtheria, rubella, varicella (chicken pox), Haemophilus influenzae type b (Hib), pertussis, tetanus, pneumococcal disease, and hepatitis B.

“Fully immunized” means that the child has either (1) received the required vaccinations for these diseases as currently set forth in state regulations; (2) for measles, mumps, rubella, hepatitis B, poliomyelitis, or varicella only, shown immunity with a positive blood test for those disease antibodies as indicated by an original lab report of positive serologic test, or a signed note from a health care provider that indicates as such; or (3) for varicella only, has had the disease, verified in writing by a physician, nurse practitioner, or physician’s assistant.

Children who are not fully immunized may only be admitted to school in two instances: (1) are in the process of receiving immunization or obtaining blood tests in accordance with the requirements prescribed in state regulations. Such students must not be excluded if they have received at least the first dose in each immunization series required by Public Health Law § 2164 and have age appropriate appointments to complete the immunization series, according to the catch up schedule of the Advisory Committee on Immunization Practices (ACIP) required by 10 NYCRR § 66-1.1 (f) (2), or are obtaining serologic tests within thirty days of notification to the parent/guardian of the need of such tests. If a child is obtaining serologic tests, he/she has a total of thirty days to provide test results and if necessary, appointment dates to begin or complete the vaccine series. (2) The children have been granted a medical or religious exemption.

Medical exemptions may be issued if immunization is detrimental to a child’s health. Medical exemptions must either be (1) the medical exemption form issued by the New York State Department of Health or the New York City Department of Health and Mental Hygiene, or (2) a statement signed by a physician licensed to practice medicine in New York State indicating the specific immunization, the medical contraindication, and the length of time the exemption is for. Medical exemptions must be reissued annually to remain valid. The Building Principal may require supporting documents for medical exemptions.

Religious exemptions may be granted by the district upon either (1) a signed and completed Request for Religious Exemption to Immunization created by the NYSED, or (2) a written and signed statement from a parent/guardian stating an objection to immunization because of genuine and sincere religious

Regulation 5420-R

beliefs which prohibit immunization. The Building Principal may require supporting documents for religious exemptions. In such cases, the Building Principal will make a case-by-case determination whether a parent or guardian is entitled to invoke his or her religious exemption from required immunizations. A denial of such exemption may be appealed to the Board of Education, in writing, within thirty (30) days of the Building Principal's decision.

All students must present appropriate documentation of their immunization status, as set forth in the Regulations of the Commissioner of Health 10 NYCRR Subpart 66-1.

The Building Principal may permit students without adequate documentation to attend school up to 14 calendar days while the parent/guardian furnishes the necessary documents. This time period may be extended to 30 days for students transferring from another state or country, as long as they show a good faith effort to obtain the necessary documentation.

District schools may access the New York State Immunization Information System (NYSIIS) or the New York City Citywide Immunization Registry (CIR) to verify the immunization history of students entering or registered in that school.

When a child is excluded from school for immunization reasons, the Building Principal shall notify the parent/guardian of their responsibility to have the child immunized, and the public resources available for doing so. The Principal shall also notify the local health authority of the child's name and address and the immunization(s) the child lacks, and shall cooperate with that authority to provide a time and place for the required immunization(s) to be administered.

The district will maintain a list of all students who have been exempted from immunization for medical or religious reasons, or who are in the process of receiving immunization, and shall exclude such students from school when so ordered by the Commissioner of Health, in the event of an outbreak in school of the vaccine-preventable diseases listed in Public Health Law 2164 and the first paragraph of this section. The exclusion shall continue until the Commissioner determines that the danger of transmission has passed.

When a student transfers out of the district, the parent/guardian will be provided with an immunization transfer record showing the student's current immunization status which will be signed by the school nursing personnel or the school physician. A transcript or photocopy of the immunization portion of the cumulative health record will be provided to the new educational institution upon request.

B. Administering Medication to Students in School

The administration of prescribed medication to a student during school hours is permitted only when the medication is necessary to allow the student to attend school or failure to administer the medication would seriously affect the student's health.

Parent(s) or guardian(s) must present the following information:

1. a written order from a NYS licensed health care provider (e.g. physician, nurse practitioner or physician assistant) containing the following: student's name, the date and name of the medicine, dosage and time to be administered, and list of possible side effects; and
2. A written note from the parent/guardian giving appropriate licensed school personnel permission to administer the medication to their child during school or for trained unlicensed personnel to assist their child in taking their own medication

Students who may carry and use certain medications

Students are permitted to self-administer medication under certain circumstances, in accordance with state law and regulation. A student is authorized to carry and use the following medications: rescue inhaler, epinephrine auto-injector, insulin, glucagon (and associated diabetes testing supplies), if the following conditions are met:

1. An authorized medical provider must provide written permission that includes an attestation that the student's diagnosis requires the medication; the student has demonstrated that he/she can self-administer the prescribed medication effectively; the name of the medication, the dose, the times when it is to be taken, the circumstances which may warrant use and the length of time during which the student may use it.
2. Written parental permission.

If a student is authorized to carry and use medication as described above, the parent/guardian is permitted to give extra medication and supplies that the district will maintain in accordance with the written directions submitted by the authorized medical provider.

All documents pertaining to student medication will be kept on file in the nurse's office.

The school nurse shall develop procedures for the administration of medication, which require that:

1. all medications will be administered by a licensed person unless the child is self-directed;

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2. medications, other than as noted above, shall be securely stored in the office and kept in their original labeled container, which specifies the type of medication, the amount to be given and the times of administration; the school nurse shall maintain a record of the name of the student to whom medication may be administered, the prescribing physician, the dosage and timing of medication, and a notation of each instance of administration; and
3. all medications shall be brought to school by the parent(s) or guardian(s) and shall be picked up by the parent(s) or guardian(s) at the end of the school year or the end of the period of medication, whichever is earlier. If not picked up within five days of the period of medication, the medication shall be discarded.

An adult must bring the medication to school in the original container. The administering staff member should clearly label the medication with the time to be given and dosage.

Sunscreen. Students are permitted to carry and apply sunscreen without a medical provider's order under the following conditions:

1. the sunscreen is used to avoid overexposure to the sun and not for medical treatment of an injury or illness, if sunscreen is required to treat a medical condition, the procedures for administering medication (above) apply;
2. the sunscreen is FDA approved for over the counter use;
3. the student's parents or guardians provide written permission annually for the student to carry and use the sunscreen.

The school nurse will keep written permission for students on file and develop procedures pertaining to this policy.

Administering medication on field trips and at after-school activities. Taking medication on field trips and at after-school activities is permitted if a student is self-directed in administering their own medication. On field trips or at other after-school activities, teachers or other school staff may carry the medication so that the self-directed student can take it at the proper time.

If a student is going on a field trip but is not self-directed (i.e., fully aware and capable of understanding the need and assuming responsibility for taking medicine), then the district may:

- permit the parent or guardian to attend the activity and administer the medication.
- permit the parent to personally request another adult who is not employed by the school to voluntarily administer the medication on the field trip or activity and inform the school district in writing of such request.
- allow the student's health care provider to be consulted and, if he/she permits, order the medication time to be adjusted or the dose eliminated.

If no other alternative can be found, a school nurse or licensed person must administer the medication.

Administering epi-pen in emergency situations. The administration of epinephrine by epi-pen has become an accepted and extremely beneficial practice in protecting individuals subject to serious allergic reactions (e.g., individual has an anaphylactic reaction to a wasp sting or the ingestion of peanut butter).

In addition, pursuant to SED guidelines, school nurses may provide training to unlicensed school staff in administering epi-pens, epinephrine auto-injectors and glucagon prescribed by a licensed medical provider, to a child who has been diagnosed with the associated disease in accordance with the process described in this policy and regulation.

C. Student Medical Exams

In accordance with Sections 903 and 904 of the State Education Law, each student shall have a physical exam given by the school doctor or licensed health provider (including a physician, physician assistant or nurse practitioner) upon entrance to school and at grades pre-kindergarten or kindergarten, two, four, seven and ten. Findings are to be kept on record at the school on forms that can be obtained from the school nurse. In addition, the school will request a dental health certificate according to the same schedule.

A student may be excluded from the medical examination requirements because the child's parent/guardian holds a genuine and sincere religious belief which is contrary to medical examinations. The request for exemption must be in writing to the principal or his/her designee.

In the event that the student's medical history reveals that they have a known life-threatening allergy, the school nurse, in conjunction with the family, student, child's teacher, and other appropriate staff, will develop and implement an individual health care plan which will guide prevention and response.

The district will work with students in the self-management of their life-threatening allergy, or other chronic health conditions, by:

1. Adequately training staff involved in the care of the child.
2. Assuring the availability of the necessary equipment and/or medications.
3. Providing appropriately licensed and trained persons on school premises, as required by law.
4. Providing ongoing staff and student education.

D. Illness or Injury in School

If a student becomes ill or injured in school:

1. The nurse will determine if the student should receive further medical attention, remain in the dispensary or return to class.
2. The nurse will call the parent, guardian or designated emergency contact if he/she feels the student should go home. In general, a parent or guardian will pick up the student from school.
3. The nurse will contact the Building Principal if he/she feels the child should be transported by bus to the home.
4. If there is to be a change in bus routing in order to carry the student to his/her home, that decision will be made by the administrator and the transportation supervisor.
5. If the route is to be changed, the transportation supervisor shall inform the bus driver.
6. If no parent, guardian or designated emergency contact picks up the student at school, or if no parent/guardian or designated emergency contact will be home, the student will remain in the nurse's office until such time as a parent, guardian or designated emergency contact becomes available to assume responsibility for the child.
7. If the nurse determines that the child can return to class, but needed some type of medical attention (i.e., a bandage for a minor scratch, a brief rest, etc.), the nurse will notify the parent using district form 5420-E.1
8. The nurse will maintain appropriate records of all student visits.

E. Medical Emergency Record

All students shall have on file a medical emergency record which shall state the name and telephone numbers of the following:

1. the student's parent(s) or guardian(s) at home and work;
2. the student's next of kin;
3. a neighbor; if designated by the parent;
4. the student's licensed health care provider;
5. preferred hospital;
6. any allergies or serious health conditions.

Students diagnosed with diabetes shall have a written diabetes management plan maintained as part of the student's cumulative health record. The management plan shall be developed in accordance with state regulation and district procedures. Students diagnosed with asthma or other respiratory disease requiring a rescue inhaler, students diagnosed with life-threatening allergy or diabetes may have an emergency action plan maintained as part of the student's cumulative medical record. The emergency action plan will be developed in accordance with state regulation and district procedures.

F. Student Return to School after Illness/Injury

In general, students should be symptom-free before returning to school and resuming normal activities. In some instances, students may be asked to provide a note from their licensed health care provider before they return to school or participate in the full range of school activities. The final decision to permit participation rests with the school physician. The Superintendent, in consultation with the school physician, nurse and other appropriate staff, will develop protocols to address a student's return to activities when there has been a serious illness or injury.

Adoption date:

BABYLON SCHOOL DISTRICT CONCUSSION MANAGEMENT POLICY PROPOSAL

The Board of Education of the Babylon School District (District) recognizes that concussions and head injuries are the most commonly reported injuries in children and adolescents who participate in athletic, physical education and recreational activities. Therefore, the District adopts the following policy and procedures to assist in the proper evaluation and management of concussions and head injuries.

A concussion is a traumatic brain injury that is defined as a complex patho-physiological process affecting the brain, induced by traumatic biomechanical forces. This typically results in the rapid onset of short-lived impairment of neurological and cognitive function that usually resolves spontaneously. Recovery from concussion will vary and resolution of the clinical and cognitive symptoms typically follows a sequential course. Avoiding re-injury and over-exertion (physical and cognitive) until fully recovered are the cornerstones of proper concussion management.

CONCUSSION MANAGEMENT POLICIES & PROCEDURES

Prevention and Safety

Protecting students from head injuries is one of the most important ways to prevent a concussion. The District will ensure that education, proper equipment, and supervision are provided to school staff, students, and parents/guardians to minimize the risk. Instruction will be mandatory for all physical education teachers, coaches, assistant coaches, volunteer coaches, nurses and certified athletic trainers. Training will include, but not limited to:

- The definition of a mild traumatic brain injury
- The signs and symptoms of mild traumatic brain injuries
- How mild traumatic brain injuries may occur
- Practices regarding prevention
- Information on post concussion and second impact syndromes

- Guidelines for the return to school and school activities of a pupil who has suffered a mild traumatic brain injury, regardless of whether such injury occurred outside of school
- The emergency protocols & procedures school staff should follow when a concussion occurs
- Information on available area resources for concussion management and treatment

Particular emphasis will be placed on the fact that no student will be allowed to return to physical activities the day of injury. Also, all students must be symptom free for a minimum of 24 hours and evaluated by and received written and signed authorization from a licensed physician before they may return to physical activities. The training for coaches and physical education teachers will be satisfied by completing the NYS Department of Education approved online training course:

http://www.edc.gov/concussion/HeadstUp/online_training.html

Nurses and certified athletic trainers will satisfy the requirement by completing the NYS Department of Education approved *online* training course:

<http://preventingconcussions.org>

At the completion of each course the registrant will obtain a certificate of completion that will be placed in their permanent file. The certification will be renewed biennially. Also, a review of the Babylon Concussion Management Policy (HICMP) will be included in the biennial CPR/AED re-certification course.

Faculty education will be provided in an annual presentation at a faculty meeting. The emphasis of the program will be the significant academic difficulties students recovering from concussion can experience due to impaired cognitive abilities. The program will foster the understanding that academic accommodations should be available to the student recovering from concussion both to ensure academic progress and to set the conditions for optimal medical recovery.

The education of parents/guardians and students will be accomplished through preseason meetings for sports teams, information sheets included in the pre-season medical clearance packet and information provided on the Babylon School District and/or

the NYS Department of Education web sites. The information will include, but not be limited to the

- Importance of not initiating contact with another player with their head or to the head of another player during physical education classes or interscholastic athletics
- Instruction and encouragement to play with their head up and be totally aware of what is going on around them
- Definition of a concussion
- Signs and symptoms of a concussion and how they occur
- Management of concussion
- Protocol for return to school and return to activity or interscholastic athletics
- Importance of students informing their parent/guardian and or appropriate school staff when they or a fellow student have sustained a concussion
- Importance of a medical evaluation should a concussion occur and the guideline for return to school and activities

The protocols will cover *all students returning to school* after suffering a concussion regardless if the accident occurred outside of school or while participating in a school-sponsored activity. Parents will be made aware of the school district's policy and how school officials will ultimately manage these injuries. For interscholastic sports, a signed consent form by the parents will attest to their understanding of the HCMIP and will be a requirement for a pupil's participation.

A thorough concussion history will be part of the athletic pre-participation questionnaire. The history should include dates of previous concussions, length of incapacitation and medical clearance. This information will be shared with the certified athletic trainer, the athlete's prospective coach and physical education instructors so they are aware of the past medical history.

Interscholastic athletics, extramural & intramural activities, physical education classes and recess present a higher than average risk for concussions. To reduce the potential risk

- The physical lay out of the facilities and their emergency safety plans

- All playground equipment will be in good repair and all play surfaces will be composed of child safety approved materials
- The physical education program will promote safety practices and equipment will be used safely and correctly
- The interscholastic coaches will give proper instruction on the rules of the sport, defining unsportsmanlike conduct, and enforcing penalties for deliberate violations
- All helmets (football, lacrosse, baseball, and softball) will meet standards set by the National Operating Committee on Standards for Athletic Equipment (NOCSAE) and will be re-conditioned and certified according to manufacturers and NOCSAE specifications
- All interscholastic coaches will carry a concussion symptom checklist, blank Concussion Assessment forms, their team's emergency contact information, their athletes past concussion history and the Babylon medical emergency card to all practices and games
- A concussion symptom checklist and blank Concussion Assessment forms will be placed in each school's nurse and physical education office

Identification of a Concussion

Any student who is observed to, or is suspected of, suffering significant blow to the head, has fallen from any height, or collides hard with another person or object may have sustained a concussion. The student should be observed for the symptoms of concussion until a licensed Physician can complete an evaluation. Symptoms of a concussion include but are not limited to:

- Headache or head pressure
- Confusion or dazed appearance
- Amnesia - retrograde (can't remember events before the incident)
antegrade (can't remember events after the incident)
- Balance difficulties or dizziness
- Double or blurry vision
- Sensitivity to light and or sound
- Nausea and or vomiting

- Irritability, sadness or change in personality
- Feeling sluggish or lightheaded
- Concentration or focusing problems
- Slowed reaction time
- Fatigue and or sleep issue
- Loss of consciousness

Students, who develop any of the following signs, or if signs or symptoms worsen, must be seen and evaluated immediately at the nearest hospital emergency room. Either a Babylon school district employee or the student's parent will accompany the student to the medical facility.

- Headaches that worsen
- Seizures
- Looks drowsy and or cannot be awakened – loss of consciousness
- Repeated vomiting
- Slurred speech
- Unable to recognize people or places
- Weakness or numbness in extremities: facial drooping
- Unsteady gait
- Change of pupil size in one eye
- Significant irritability
- Any loss of consciousness
- Blood draining from the ears and/or nose

The staff member who observes or learns of the possible concussion must immediately remove the student from athletic activity and or physical activities (e.g., recess and physical education class) and institute the Emergency Action Plan. At no time should a student suspected of sustaining a concussion be returned to physical activities until at least 24 hours have passed without symptoms and the student has been assessed and cleared by a licensed Physician to begin a graduated return to activities. Students removed from athletic and or other physical activities at school for a suspected concussion must be evaluated by and receive written and signed authorization from a

physician in order to return to physical activities in school. All authorizations will be reviewed and approved by the Chief Medical Officer.

Students, whose symptoms worsen or generally show no reduction after 7-14 days, should be recommended to see a neurologist or other medical specialist in traumatic brain injury for consultation.

Emergency Action Plan

When a student shows any signs or symptoms of a concussion:

- The student will not be allowed to return to physical activity that day
- During school hours the staff member who observes the possible concussion will immediately contact the building's nurse
- During home athletic events the athletic coach who observes the possible concussion will immediately contact the district's certified athletic trainer
- During away athletic events the athletic coach will ask assistance from the local medical staff
- During after school hours the staff member who observes the possible concussion will monitor the student in the event an ambulance is needed
- Either the nurse or certified athletic trainer will assess the student at the time of the injury by using the Babylon Concussion Assessment Form.
- Any athlete sustaining any loss of consciousness will be immediately transported by ambulance to the nearest medical facility. Either a Babylon School District employee or the student's parent will accompany the student to the hospital.
- It is the responsibility of the medical staff and or staff member to contact the student's parents in the event of a possible concussion. Each parent will be given the Head Injury Home Care Instructions and how to obtain concussion information from the District web-site. If parents have further questions they may contact the District's medical professionals.

Post-concussion Management

Students who have been diagnosed with a concussion require both physical and cognitive rest. Delay in instituting medical providers orders for such rest may prolong recovery. Private Physician's orders for avoidance of cognitive and physical activity and

graduated return to activity will be monitored both at home and school. Physical rest requires that a student avoid participation in any activities that will increase heart rate or blood pressure including but not limited to: physical education classes, recess or interscholastic sports.

Cognitive rest requires that a student avoid participation in and or limit activities requiring concentration or mental stimulation including but not limited to: computer games, television viewing, texting, reading, writing, studying, test taking, loud music, and bright lights. The duration and quantity of cognitive rest varies depending on the severity of the concussion and will be determined on an individual basis.

The Chief Medical Officer will review the private physicians orders. Any orders inconsistent with the District's concussion management policy may not be accepted and will require the Chief Medical Officer contacting the private physician. It will be District policy that no student will resume activities until fully recovered. The District will adhere to the best practice that whenever there is a question of safety, all parties will err on the side of caution.

Return of symptoms should *guide whether the student should participate* in an activity. School staff should watch for signs of concussion such as fatigue, irritability, headaches, blurred vision or dizziness, reappearing with any type of cognitive or physical activity. If any of these signs and symptoms occurs the student should cease the activity.

Return to Physical Activities

There are many risks to premature return to play including: a greater risk for a second concussion because of a lower concussion threshold, second impact syndrome (abnormal brain blood flow that can result in death), exacerbation of any current symptoms, and possibly increased risk for additional injury due to alteration in balance. Return to physical activities following a concussion will involve a stepwise progression once the individual is symptom free. While the athlete is symptomatic, he or she will be medically excused from physical education classes, recess, and interscholastic athletics other recreational activities until the student is cleared to participate.

These return to physical activities recommendations are based on the most recent international expert opinion (*Consensus Statement on Concussion in Sport - The 3rd International Conference on Concussion in Sport, Zurich, and November 2008*) and will

remain in effect until new medically recognized guidelines have been established. The Return to Physical Activities Protocol (RTPAP) are as follows:

- No student will be allowed to return to play without clearance from a medical professional and is cleared by the Chief Medical Officer.
- The athlete must have a signed release by the treating clinician *before she he may begin the return to physical activities progression (RTPAP)* (provided there are no other mitigating circumstances).
- If any symptoms return during the RTPAP, the student will stop the protocol, wait until the symptoms subside and return to the previous level. The Certified Athletic Trainer and or School Nurse along with the Chief Medical Officer will be notified if the student develops symptoms during the RTPAP.
- The RTPAP will be performed by the Athletic Trainer; or a Physical Education teacher in cooperation with the School Nurse.
- The Certified Athletic Trainer and or School Nurse along with the Chief Medical Officer will be notified when the student successfully completes the RTPAP.
- Any loss of consciousness, signs, symptoms lasting 7 days or longer or repeat concussions will require a minimum 7 day asymptomatic period and medical clearance before beginning the RTPAP and will be managed on an individual basis as approved by the CMO. The asymptomatic period for any concussion may be extended at the discretion of the CMO.
- The return to physical activities steps are as follows:
 - **Level I** Light activity
i.e., walking
 - **Level II** Low-impact aerobic activities
i.e., bike, light jogging
 - **Level III** Moderate aerobic activity
i.e., moderate jogging, jumping jacks, side shuffle
 - **Level IV** Sub-maximal aerobic activity
i.e., jumping jacks, sit-ups push-ups, PE skills
 - **Level V** Maximal aerobic activity

i.e., jump rope, carioca, side shuffle, power skips

- Level VI Return to all physical activities
- The return to physical activities steps for interscholastic sports are as follows:
 - Level I low impact, non-strenuous, light aerobic activity such as walking or riding a stationary bike
 - Level II higher impact, higher exertion, and moderate aerobic activity such as running or jumping rope; no resistance training
 - Level III sport-specific non-contact activity; low resistance weight training with a spotter
 - Level IV sport specific activity, non-contact drills; higher resistance weight training with a spotter
 - Level V full contact training skills and intense aerobic activity;
 - Level VI return to full activities without restrictions

Return to Academic Activities

Initially a student with a concussion may only be able to attend school for a few hours per day and/or need rest periods during the day. *Students may exhibit* increase *difficulties* with focusing, memory, learning new information, and/or an increase in irritability or impulsivity. The District will ensure that no student sustaining a concussion will be academically penalized as a result of poor cognitive ability. Each student's ability to perform academic activities will be evaluated on an individual basis. The District will make every effort to transition students with continued symptoms back to school. To accomplish this the building principal and/or guidance counselor will consult with teachers and on a temporary basis provide academic accommodations. A 504 plan will be developed for students whose concussion symptoms are significant or last longer than 6 months.

Staff Responsibilities

Chief Medical Officer

The District Chief Medical Officer plays an important role in setting policies and procedures related to identifying students who may have sustained a concussion, along with post-concussion management in school. The Chief Medical Officer will

- Assist school staff by acting as a liaison to the student's Physician

- Attend 504 and CSE meetings when requested by the Director of Special Education
- Review all Physician s' written clearances as to their adherence to the IICMP
- Clear all students returning to interscholastic athletics in accordance with Commissioner's Regulations
- Implement district policy on return to activities.
- Monitor the progress of individual students with protracted recovery, multiple concussions, atypical recovery
- Collaborate and communicate with the school nurses and certified athletic trainers about any student who is suspected of having or is diagnosed with a concussion
- Participate in professional development activities as needed to keep knowledge base and practice current

School Nurse

The School Nurse plays an integral role in identifying a student with a potential concussion, and assessing the student diagnosed with a concussion in their progress in return to school activities. The School Nurse will

- Assess students who have suffered a fall or blow to the head for signs and symptoms of a concussion.
- Assess the student to determine if any signs and symptoms of concussion warrant emergency transport to the nearest medical facility.
- Refer parents guardians of students with a potential concussion to their Physician for evaluation.
- Provide parents guardians with oral and or written instructions on observing for complications that would warrant immediate emergency care.
- Inform appropriate staff of a student's diagnosis of concussion, and share the private Physician's requests for accommodations.
- Monitor and assess the student's return to school activities, assessing the student's progress with each step and communicating with the Chief Medical Officer, Certified Athletic Trainer, private Physician, parent guardian and appropriate school staff.

- Review a private physician's written orders for accuracy and provide copy to the Chief Medical Officer.
- Educate staff and students in concussion management and prevention.
- Complete the Department of Education approved course for school nurses.

Director of Athletics, Physical Education, Health and Nursing Services

The Director will be aware of school policies regarding concussion management and educate physical education teachers, coaches, parents guardians, and students about such policies. The Director will be the liaison between the coaches and school staff. The Director will:

- Ensure that pre-season consent forms include information from the Department of Education website along with district policies and protocols for concussion management.
- Ensure educational programs on the district policies and protocols for concussion management are presented to parents guardians and student-athletes.
- Ensure that any student identified as potentially having a concussion is not permitted to participate in any physical education and/or athletic activities until written clearance is received from the Chief Medical Officer
- Communicate to coaches and physical education instructors the district policies on concussions and care of injured students during interscholastic athletics or physical education classes.
- Ensure New York State Public High School Athletic Association policies are followed and enforced for interscholastic athletics
- Support staff implementation of the Return to Physical Activities Protocol
- Enforce district policies on concussions including training requirements for coaches, physical education teachers, certified athletic trainers and nurses in accordance with the Department of Education regulations.

Certified Athletic Trainer

The Certified Athletic Trainer under the supervision of the Chief Medical Officer can assist medical director, nurse and the Director of Physical Education by identifying a student with a potential concussion. The Certified Athletic Trainer can also evaluate the

student diagnosed with a concussion in their progress in the Return to Physical Activities Protocol. The Certified Athletic Trainer will:

- Perform baseline assessments of high school interscholastic athletes
- Evaluate students for the signs and symptoms of a possible concussion
- Evaluate students to determine if any signs and symptoms of concussion warrant emergency transport to the nearest medical facility
- Refer parents/guardians of students with a potential concussion to their Physician for evaluation.
- Provide parents/guardians with oral and/or written instructions on observing for complications that would warrant immediate emergency care.
- Inform appropriate staff of a student's diagnosis of concussion, and share the private Physician's requests for accommodations.
- Monitor and assess the student's return to school activities, assessing the student's progress with each step and communicating with the Chief Medical Officer, school nurse, private Physician, parent/guardian and appropriate school staff.
- Review a private physician's written orders for accuracy and provide copy to the Chief Medical Officer.
- Educate staff and students in concussion management and prevention both in pre-season activities and ongoing communications.
- Perform post-concussion evaluations or use standardized tests or tools to the high school interscholastic athletes; provide the results to the Chief Medical Officer and the private Physician to aid them in determining the student's status.
- Complete the Department of Education approved course for school nurses.

Physical Education Teachers / Coaches

Since concussions often occur during athletic type activities, physical education teachers and coaches are often the first individuals that respond to the emergency. Physical education teachers and coaches will:

- Immediately remove any student from play who presents with the signs and symptoms of a head injury.

- Ensure that game officials, coaches, physical education teachers, or parents guardians are not permitted to determine whether a student can continue to play.
- Contact the school nurse or certified athletic trainer for assistance with any student injury
- Monitor the students during the Return to Physical Activities Protocol in conjunction with the School Nurse.
- Send to the nearest medical facility any student exhibiting signs and symptoms of a more significant concussion.
- Inform the parents guardians of the need for evaluation by a Physician.
- Inform the Director of Physical Education, certified athletic trainer, and school nurse of the student's potential concussion.
- Ensure that students are not to participate in any physical education and or athletic activities until they have written authorization from the Chief Medical Officer that the student has been cleared to participate.
- Not substitute *mental activities* for physical activities in their class.
- Complete the Department of Education approved online course physical education teachers and coaches.

VISITORS TO THE SCHOOLS

To promote effective communication between the citizens of the community and the school system, the Board of Education encourages parents and other citizens to visit their schools periodically during the course of the school year.

The Board recognizes that many visits that occur are regularly scheduled events, e.g., parent-teacher organization meetings, public gatherings, registering of students, etc.

There are also occasions when parents or guardians desire to visit their child's classroom at other than regularly scheduled times. When such visitations occur, they shall be made on the basis of a written defined need to the attention of the Principal and shall be permitted only with the approval of the Principal. The Board views these visits as constructive; however, no such visit shall be permitted to interfere with the educational process.

Persons who are not students or staff of the Babylon Union Free School District shall report immediately to the school office upon being given clearance to enter the building by the security desk and will state the reason for their visit. This includes all volunteers and representatives of organizations. Only the principal is to approve such visitations and is strongly encouraged to approve such visits outside of instructional hours.

Student visitors from other schools, unless they have a specific reason and prior approval of the Superintendent of Schools, shall not be given permission to enter school buildings.

Unauthorized persons shall not be permitted in school buildings nor to loiter on school grounds. A violation of the visitation policy shall be prosecuted pursuant to New York State law.

Cross-ref: 1520, Public Conduct on School Property
2111.1, Board Member School Visits
5450.1, Notification of Released Sex Offenders
8135, Safe Schools

Ref: Education Law §1708; 2801

Adoption date: April 2, 2001