

Students

POSITIVE SCHOOL CLIMATE

BP 5137

Note: This policy endorses positive steps to create a positive school climate, which is linked to student achievement.

Research indicates that student achievement is often higher in schools with a positive climate. The School Board expects a positive and welcoming climate in each school, which is reflected through safe, well-managed classrooms and common areas, clearly stated high expectations about individual responsibility, and whose teachers and staff consistently acknowledge all students and fairly address students' behavior.

School Climate refers to the social and environmental factors that contribute to students' experience of, and attitude towards, their school. School climate is related to how well students feel connected with others at their school. Without a positive school climate, students are unlikely to see their school as a place they feel welcomed, challenged and nurtured.

The Superintendent or designee may implement and support strength-based activities such as Social Emotional Learning (SEL) efforts, youth leadership initiatives, family involvement in schools, and community service projects.

All members of the school community, including staff, students, administrators, Iditarod School Board members and visitors, are expected to serve as role models by demonstrating positive attitudes, cultural sensitivity, and respect to students and staff members. Staff shall use effective classroom management strategies to foster positive social interactions among students, and encourage and recognize activities that foster a positive school climate.

The Superintendent or designee will administer the School Climate and Connectedness Survey on a regular basis, share results with the Iditarod School Board, staff, students and the community, and commit to improving school climate and connectedness ratings.

(cf. 6141.3 - Multicultural Education)

(cf. 6142.4 - Community Service)

The schools shall not tolerate any form of harassment, intimidation, or bullying that would interfere with there being a positive school climate. Students, staff, administrators and Iditarod School Board members who engage in these acts shall be subject to appropriate disciplinary procedures.

(cf. 5131.4 - Campus Disturbances)

(cf. 5131.43 – Harassment, Intimidation and Bullying)

(cf. 5144 - Discipline)

Legal Reference:

ALASKA STATUTES

14.33.200 Harassment, intimidation and bullying policy

Rev. 03/2012

**IDITAROD AREA SCHOOL DISTRICT
DATE OF ADOPTION: December 2014**

Students

STUDENT POSSESSION & USE OF PORTABLE ELECTRONIC DEVICES, INCLUDING CELLULAR PHONES

BP 5138 (a)

The Iditarod School Board recognizes that many students possess and use cell phones and other portable electronic devices. These devices serve an important purpose in facilitating communication between the student and his or her family, as well as serving as tools to access electronic information. In the school setting, portable electronic devices are permitted so long as their use is consistent with this policy and does not interfere with the educational process or with safety and security.

(cf. 5030 – School Discipline and Safety)

Educational Uses

In many instances, there is educational value in utilizing portable electronic devices in the classroom when such devices deliver content, and extend, enhance, and/or reinforce a student's learning process related to the student's learning style, the instructional objectives of the class and/or the learning environment. The appropriateness of in-class use of these devices consistent with the instructional objectives within instructional time will be determined by the classroom teacher with the approval by the principal/principal-teacher.

Use of portable electronic devices for students with disabilities will be outlined in a student's Individualized Education Program (IEP) or Section 504 plan, as determined appropriate by the IEP or 504 Team.

(cf. 6159 – Individualized Education Program)

If use of a portable electronic device is required in individual instances (not provided for in an IEP or 504 plan) to assist a student with the student's education, permission must be obtained in writing from the principal/principal-teacher prior to use of the portable electronic device at any time when such use would otherwise be prohibited by this policy. In case of an emergency, verbal permission by a teacher or principal/principal-teacher is required in situations where permission can be obtained.

**IDITAROD AREA SCHOOL DISTRICT
DATE OF ADOPTION: December 2014**

Students

STUDENT POSSESSION & USE OF PORTABLE ELECTRONIC DEVICES, INCLUDING CELLULAR PHONES (continued)

BP 5138 (b)

Portable electronic devices shall not be turned on or used in any way: (1) during other school sponsored and supervised group activities during the school day (for example, student assemblies, awards, or other public ceremonies, etc.); or (2) when their use is otherwise prohibited by school personnel.

(cf. 6116 – Classroom Interruptions)

Instructional time includes the entire period of a scheduled class and other time when students are directed to report to and participate in any instructional activity. The principal/principal-teacher may establish, and school personnel may enforce, additional guidelines limiting or prohibiting the possession and use of portable electronic devices as appropriate to campus needs. The learning environment includes all times that a student is on school grounds during the school day and when school sponsored and supervised group activities are held.

No student may use a cellular phone or portable electronic device in a manner, or at a time, that interferes with or is disruptive of other student's instructional time.

(cf. 6116 – Classroom Interruptions)

During school and school sponsored activities, students will comply with this policy and with administrative and staff member directives regarding use. Students are required to turn cell phones and other portable electronic devices over to school personnel when requested. Students who refuse to do so are subject to disciplinary action.

A cellular phone or portable electronic device that has been confiscated by the district and not turned over to law enforcement will be released/returned to the parent/guardian when no longer necessary for investigation or disciplinary proceedings. As appropriate, the cellular phone or portable electronic device may be returned directly to the student.

The district assumes no responsibility for loss or damage to personal property of students, including cell phones and other portable electronic devices, whether in the possession of students or if confiscated by school personnel pursuant to this policy.

Prohibited Conduct

Possession of a cellular telephone or other portable electronic device by students is a privilege. This privilege will be forfeited by any student who fails to abide by the terms of this policy, or otherwise engages in misuse of the device so as to violate the law or any other school or district rule. In addition to those conduct rules set forth elsewhere, the following actions are strictly prohibited and may result in disciplinary action:

**IDITAROD AREA SCHOOL DISTRICT
DATE OF ADOPTION: December 2014**

Students

STUDENT POSSESSION & USE OF PORTABLE ELECTRONIC DEVICES, INCLUDING CELLULAR PHONES (continued)

BP 5138 (c)

1. Accessing and/or viewing an Internet site that is otherwise blocked to students at school.
2. Sending an e-mail, text message or other communication that harasses, intimidates, threatens, bullies, or discriminates against another individual.
3. Taking, sending, downloading or uploading a harassing, threatening, or inappropriate photograph of anyone.
4. Using a cell phone/smartphone or camera to take photos in a restroom, dressing room, or locker room, or to take a photo of any person who has requested that you not do so.
5. Using a camera or other recording device to record or capture the content of tests, assessments, homework, or class work without express prior permission from the instructor.
6. Hacking or intentionally obtaining, accessing, or modifying files, passwords, or data belonging to others.

(cf. 5131 – Conduct)

(cf. 5131.4 – Campus Disturbances)

(cf. 5131.41 – Violent and Aggressive Conduct)

(cf. 5131.42 – Threats of Violence)

(cf. 5131.43 – Harassment, Intimidation and Bullying)

(cf. 5131.9 – Academic Honesty)

(cf. 5137 – Positive School Climate)

(cf. 6161.4 – Internet)

(cf. 6161.5 – Web Sites/Pages)

Searches

The contents of a cell phone/smartphone, camera, or other portable electronic device may be searched to determine ownership, to identify emergency contacts, or upon reasonable suspicion that a school or district rule or the law has been violated.

(cf. 5145.12 – Search and Seizure)

Revised 3/2012

**IDITAROD AREA SCHOOL DISTRICT
DATE OF ADOPTION: December 2014**

Students

HEALTH CARE AND EMERGENCIES

BP 5141 (a)

Note: In 2006, the Alaska Legislature passed SB 48, a component of which prohibits school personnel from referring parents to a specific health care provider. AS 14.30.171(a)(4). However, school districts may make available to parents a list of community medical and mental health resources. AS 14.30.176. These requirements are set forth in the policy below. Any referral to community resources must contain certain mandatory information, which is included in AR 5141.

The Iditarod School Board recognizes the importance of taking appropriate action whenever an accident or illness threatens the safety, health or welfare of a student at school or during school-sponsored activities. The Superintendent or designee shall establish procedures to minimize the effects of an injury by providing first aid and/or medical attention as quickly as possible, to notify parents/guardians of the accident and to take other steps necessary in the interests of the student and the district.

Emergency Contact Information

To facilitate immediate contact with parents/guardians on such occasions, the Iditarod School Board requires parents/guardians to 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.

(cf. 5141.21 - Administering Medication)

(cf. 5141.3 - Health Examinations)

Referral to Community Resources

Note: Under AS 14.30.177, school boards must adopt a policy that employees who refer parents to individual health care providers may be subject to disciplinary action. In 2006, such referrals became prohibited by law. AS 14.30.171(a)(4).

School personnel, except those possessing a special services type C certificate, should not recommend that a parent or guardian seek services from a specific physician, psychologist, or other health specialist. Violations of this policy may result in disciplinary action.

**IDITAROD AREA SCHOOL DISTRICT
DATE OF ADOPTION: December 2014**

Students

HEALTH CARE AND EMERGENCIES (continued)

BP 5141 (b)

School personnel may provide a community resource list that identifies community medical and mental health resources. The Superintendent or designee is responsible for ensuring that any list of community providers complies with legal requirements.

Legal Reference:

ALASKA STATUTES

09.65.090 Civil liability for emergency aid

14.30.141 Self-administration and documentation of medication

14.30.171 Prohibited actions

14.30.176 List of community resources

Revised 01/07

Students

HEALTH CARE AND EMERGENCIES

AR 5141

Parents should only be referred to medical or mental health providers through the use of a community referral list. For any individual provider identified on the community referral, the list must contain the name, specialty, and credentials of the individual. All lists of community resources must include the following language:

This list is provided as a resource to you. The school neither recommends nor requires that you use this list or any of the services provided by individuals or entities on the list. It is for you to decide what services, if any, to use and from whom you wish to obtain them.

The principal/principal-teacher is responsible for ensuring that referrals are made in compliance with the above requirements and BP 5141.

Added 01/07

**IDITAROD AREA SCHOOL DISTRICT
DATE OF ADOPTION: December 2014**

Students

ADMINISTERING MEDICATION

BP 5141.21 (a)

Note: In 2005, AS 14.30.141 was passed requiring districts to permit the self-administration of medication by students for asthma or anaphylaxis. Self-administration may only be permitted upon a school's annual receipt of written certification by the student's parent/guardian and the student's health care provider. The statute also requires parents to release the school district from liability from any injury that may result from the storage and self-administration of asthma and anaphylaxis medication. Finally, the statute provides that students who use the medication in a manner other than prescribed are subject to disciplinary action.

The Iditarod School Board recognizes that students sometimes may need to take prescribed medication during the school day in order to be able to attend school without jeopardizing their health. In such cases, when the district has received written statements from the student's physician and parent/guardian as required by law, designated personnel shall assist the student in taking the medication.

The Iditarod School 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 store and provide such injections. School staff who may be required to administer anaphylactic injections shall receive appropriate training and will be authorized to administer the injections within the legal provisions of law.

(cf. 5141 - Health Care and Emergencies)

Self-Administration of Medication for Asthma or Anaphylaxis

A student may be permitted to carry medication that has been prescribed or ordered by a physician to stay on or with the student due to a pressing medical need. Students who have received instruction in the self-administration of asthma or anaphylaxis medication shall be permitted to carry and self-administer the medication upon written authorization of the parent/guardian and health care provider, consistent with law and procedures developed by the Superintendent or designee. Written authorization must be submitted annually.

By law, neither the district nor its schools are liable for injuries that may result from the storage or self-administration of medication. No student will be permitted to carry or self-administer a prescribed medication without a release of liability for the school, its employees, and agents. The release of liability shall include an agreement to indemnify and hold harmless the school and its employees or agents from claims arising out of the storage or self-administration of medication.

**IDITAROD AREA SCHOOL DISTRICT
DATE OF ADOPTION: December 2014**

Students

ADMINISTERING MEDICATION (continued)

BP 5141.21 (b)

A student who uses the medication in a manner other than prescribed is subject to disciplinary action.

Legal Reference:

ALASKA STATUTES

09.65.090 Civil liability for emergency aid

14.30.141 Self-administration and documentation of medication

Revised 2/06

Students

ADMINISTERING MEDICATION

AR 5141.21 (a)

Before a designated employee administers any prescription or over-the-counter medication to any student during school hours, the district shall have received:

1. A written statement from the student's physician or pharmacy label detailing the prescribed method, amount and time schedules by which the medication is to be taken, and
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.

Medication shall be in 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 be responsible for the medication at school and shall administer it in accordance with the physician's indicated dosage schedule.

All medications must be delivered to the school by the parent/guardian or his/her adult representative.

The designated employee shall maintain a list of students needing medication during school hours, including the type of medication, times, and dosage. This list will be kept in the principal/principal-teacher's and/or school nurse's office and shall be reviewed and updated periodically.

The designated employee shall maintain a log recording the student's name and the time and date when medications were given.

All medication shall be kept in a locked drawer or cabinet.

Anaphylactic Injections

1. Parents/guardians of students who may require emergency anaphylactic injections shall provide explicit written permission for authorized staff to administer such injections.
2. Each year, school employees designated by the principal/principal-teacher shall receive training in administering anaphylactic injections. Qualified medical personnel shall provide this training.

**IDITAROD AREA SCHOOL DISTRICT
DATE OF ADOPTION: December 2014**

Students

ADMINISTERING MEDICATION (continued)

AR 5141.21 (b)

3. The principal/principal-teacher 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/principal-teacher or designee shall prepare a list naming the students who may need emergency anaphylactic injections. This list shall be posted in the school health office, given to all concerned staff, and updated annually.
5. All medication for injections shall be labeled with the student's name, medicine name, and expiration date. It shall be stored in a locked cabinet with easy access by authorized staff.
6. The principal/principal-teacher 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.

Self-Administration of Anaphylactic Injections (EpiPen) and Asthma Inhalers

1. Students will be permitted to carry and self-administer asthma and anaphylaxis medication if the parents/guardians provide the school with the following:
 - a. written authorization from a parent or legal guardian for the self-administration of the medication.
 - b. written certification from a student's health care provider that the student: (1) has asthma or a condition that may lead to anaphylaxis; and (2) has received instruction in the proper method of self-administration of the medication; and (3) has demonstrated to the health care provider the skill level necessary to use the medication and any device that is necessary to administer the medication as prescribed.
 - c. an Asthma and/or Allergy/Anaphylaxis Action Plan (written treatment plan) signed by the student's health care provider.

**IDITAROD AREA SCHOOL DISTRICT
DATE OF ADOPTION: December 2014**

Students

ADMINISTERING MEDICATION (continued)

AR 5141.21 (c)

- d. a release of liability for the school and its employees or agents for injury arising from self-administration.
- e. an agreement to indemnify and hold harmless the school and its employees for claims arising from self-administration.

All of the information identified in number 1 above must be updated annually.

1. Schools shall provide a written notice to the student's parents or guardians of the school's absence of liability related to the self-administration of medication according to the law.
2. The principal/principal-teacher or designee shall prepare a list of students authorized to carry and self-administer medication. The list shall be posted in the school health office, given to all concerned staff, and updated annually.
3. All inhalers and injection kits shall be clearly labeled with the student's name, medicine name, and expiration date.
4. The student shall report each use of the asthma inhaler or anaphylactic injection to [his or her teacher/principal/principal-teacher/school health office] so that a record of administration may be kept.
5. Students are not permitted to misuse an inhaler or EpiPen in any way, including sharing the medication with another student, or sticking or spraying it at anyone. Doing so will result in disciplinary action, up to and including, suspension or expulsion. Disciplinary action will not limit the student's immediate access to the prescribed medication.

Revised 2/06

**IDITAROD AREA SCHOOL DISTRICT
DATE OF ADOPTION: December 2014**

Students

ADMINISTERING MEDICATION (continued)

E 5141.21 (b)

ALLERGY/ANAPHYLAXIS ACTION PLAN (continued)

DOSAGE

Epinephrine: Inject into outer thigh **EpiPen 0.3 mg** OR **EpiPen Jr. 0.15 mg** (see reverse for instructions)

Antihistamine: Benadryl _____ mg To be given by mouth *only if able to swallow*.

Other: _____

[] This child has received instruction in the proper use of the EpiPen. It is my professional opinion that this student **SHOULD** be allowed to carry and use the EpiPen independently. The child knows when to request antihistamine and has been advised to inform a responsible adult if the EpiPen is self-administered.

[] It is my professional opinion that this student **SHOULD NOT** carry the EpiPen.

Health Care Provider Signature _____

Health Care Provider Phone Number: _____ Date _____

EMERGENCY CALLS

1. **Call 911.** State that an allergic reaction has been treated, and additional epinephrine may be needed.
2. Call parents/guardian to notify of reaction, treatment and student's health status.
3. Treat for shock. Prepare to do CPR.
4. Accompany student to ER if no parent/guardians are available.

**IDITAROD AREA SCHOOL DISTRICT
DATE OF ADOPTION: December 2014**

Students

ADMINISTERING MEDICATION (continued)

E 5141.21 (c)

ALLERGY/ANAPHYLAXIS ACTION PLAN (continued)

PREVENTION

Avoidance of allergen is crucial to prevent anaphylaxis. Critical components to prevent life threatening reactions: √ Indicates activity completed by school staff

- Encourage the use of Medic-alert bracelets
- Notify teacher(s) front office and kitchen staff of known allergies
- Use non-latex gloves and eliminate powdered latex gloves in schools
- Ask parents to provide non-latex personal supplies for latex allergic students
- Post "Latex reduced environment" sign at entrance of building
- Encourage a no-peanut zone in the school cafeteria

To Be Completed by Parent/Guardian, Student and School:

Student Name _____ D.O.B. _____

Parent/Guardian AUTHORIZATIONS:

I want this allergy plan implemented for my child; **I want my child to carry the EpiPen** and I agree to release the school district and school personnel from all claims of liability if my child suffers any adverse reactions from self-administration of EpiPen.

I want this plan implemented for my child and I **do not** want my child to self-administer EpiPen.

It is recommended that backup medication be stored with the school/ school nurse in case a student forgets or loses EpiPen and/or antihistamine. The school district is not responsible or liable if backup medication is not provided to the school/ school nurse and student is without medication when medication is needed.

Your signature gives permission for the nurse to contact and receive additional information from your health care provider regarding the allergic condition(s) and the prescribed medication.

Parent/Guardian

Signature: _____ Phone: _____ Date: _____

**IDITAROD AREA SCHOOL DISTRICT
DATE OF ADOPTION: December 2014**

Students

ADMINISTERING MEDICATION (continued)

E 5141.21 (d)

ALLERGY/ANAPHYLAXIS ACTION PLAN (continued)

Student Agreement:

I have been trained in the use of my EpiPen and allergy medication and understand the signs and symptoms for which they are given;

I agree to carry my EpiPen with me at all times;

I will notify a responsible adult (teacher, nurse, coach, noon duty, etc.) **IMMEDIATELY** when auto-injector EpiPen (epinephrine) is used;

I will not share my medication with other students or leave my EpiPen unattended;

I will not use my allergy medications for any other use than what it is prescribed for.

Student Signature: _____ Date: _____

Back-up medication is stored at school? [] Yes [] No

Approved by Principal/Principal-Teacher Signature/Date: _____

DIRECTIONS FOR EPIPEN® USE

Pull off gray activation cap.

Hold Back tip to outer thigh (apply to thigh **ONLY**).

Press hard into outer thigh until auto-injector mechanism functions. Hold in place for 10 seconds.

Massage the injection site for 10 seconds.

Ones EpiPen® is used, call 911/EMS. Take the used EpiPen to the emergency room with you.

STAFF MEMBERS TRAINED

NAME	TITLE	LOCATION/ROOM #	TRAINED BY

EMERGENCY CONTACTS

	NAME	HOME #	WORK #	CELL #
Parent/Guardian				
Parent/Guardian				
Other:				
Other:				

IDITAROD AREA SCHOOL DISTRICT
DATE OF ADOPTION: December 2014

Students

ADMINISTERING MEDICATION (continued)

E 5141.21 (e)

STUDENT ASTHMA ACTION CARD

Name: _____ D.O.B. _____

Teacher _____

School Nurse: _____ Phone Number: _____

Health Care Provider Treating Student for Asthma: _____

Health Care Provider Phone Number: _____

Preferred Hospital _____

My Personal Best Peak Flow Reading: _____ (If Applicable)

Green Zone: All Clear

- Breathing is easy. No asthma symptoms with activity or rest
- Peak Flow Range: _____ to _____ (80 to 100% of personal best) *If applicable*
 - Pre-medicate if needed 10 to 20 minutes before sports, exercise or other strenuous activity
 - Pre-exercise medications listed in #1 below.

Yellow Zone: Caution

- Cough or wheeze. Chest is tight. Short of breath.
- Peak Flow Range: _____ to _____ (50 to 80% of personal best) *If applicable.*
 - Medicate with quick reliever. Give medications as listed below.
 - May re-check peak flow in 15 to 20 minutes.
 - Student should respond to treatment in 15-20 minutes and return to green zone, if not contact parent.

**IDITAROD AREA SCHOOL DISTRICT
DATE OF ADOPTION: December 2014**

Students

ADMINISTERING MEDICATION (continued)

E 5141.21 (f)

STUDENT ASTHMA ACTION CARD (continued)

Red Zone: Emergency Plan

- Call EMS if student has any of the following:
- Coughs constantly
- No improvement 15-20 minutes after initial treatment with medication
- Hard time breathing with some or all of these symptoms of respiratory distress:
 - Chest and neck pulled in with breathing
 - Stooped body posture
 - Struggling or gasping
- Trouble with walking or talking due to shortness of breath
- Lips or fingernails are grey or blue

Peak flow below: _____ (50% of personal best) *If applicable.*

- Medicate with quick reliever. Give medications as listed below.
- Re-check peak flow in 15 to 20 minutes.
- Student should respond to treatment in 15-20 minutes.
- Contact parent/guardian.

Emergency Asthma Medications – *to be completed by Health Care Provider*

Name	Amount
1. _____	_____
2. _____	_____

Health Care Provider AUTHORIZATION:

This Child has received instruction in the proper use of his/her asthma medications.

It is my professional opinion that this student *should/should not* (circle one) be allowed to carry, store and use his/her asthma medications by him/herself.

Health Care Provider Signature: _____ Date: _____

IDITAROD AREA SCHOOL DISTRICT
DATE OF ADOPTION: December 2014

Students

ADMINISTERING MEDICATION (continued)

E 5141.21 (g)

STUDENT ASTHMA ACTION CARD (continued)

Side 2: To Be Completed by Parent/Guardian and Student

Student Name: _____ **D.O.B.** _____

DAILY ASTHMA MANAGEMENT PLAN

- **Identify the things which start an asthma episode (If known, check each that applies to the student. These should be excluded in the student’s environment as much as possible.)**

<input type="checkbox"/> Exercise	<input type="checkbox"/> Chalk dust/dust	<input type="checkbox"/> Food _____
<input type="checkbox"/> Strong odors or fumes	<input type="checkbox"/> Carpets in the room	<input type="checkbox"/> Molds
<input type="checkbox"/> Respiratory infections	<input type="checkbox"/> Animals _____	<input type="checkbox"/> Latex
<input type="checkbox"/> Change in temperature	<input type="checkbox"/> Pollens (Spring/Summer/Fall)	<input type="checkbox"/> Other _____

- **List all asthma medications taken each day.**

Name	Amount	When to Use
1. _____		
2. _____		
3. _____		

COMMENTS / SPECIAL INSTRUCTIONS

AUTHORIZATIONS

Parent/Guardian:

- I want this plan to be implemented for my child in school.
- I authorized my child to carry and self-administer asthma medications and I agree to release the school district and school personnel from all claims of liability if my child suffers any adverse reactions from self-administration and/or storage of asthma medications.
[] Yes [] No

**IDITAROD AREA SCHOOL DISTRICT
DATE OF ADOPTION: December 2014**

Students

ADMINISTERING MEDICATION (continued)

E 5141.21 (h)

STUDENT ASTHMA ACTION CARD (continued)

Parent/Guardian (continued)

- It is recommended that backup medication be stored with the school/ school nurse in case a student forgets or loses inhaler or inhaler is empty. The school district is not responsible or liable if backup medication is not provided to the school/ school nurse and student is without working medication when medication is needed.

Your signature gives permission for the nurse to contact and receive additional information from your health care provider regarding the asthma condition and the prescribed medication.

Parent/Guardian Signature: _____ **Date:** _____

Student Agreement:

- I understand the signs and symptoms of asthma and when I need to use my asthma medication.
- I agree to carry my medication with me at all times.
- I will not share my or use my asthma medications for any other use than what it is prescribed for.

Student Signature: _____ **Date:** _____

Approved by School Nurse/School Principal/Principal-Teacher:

Back-up medication is stored at _____ [] Yes [] No

Principal/Principal-Teacher Signature: _____ **Date:** _____

Students

INFECTIOUS DISEASES

BP 5141.22 (a)

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

(cf. 4119.43 - Universal Precautions)

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

(cf. 5141.23 - Infectious Disease Prevention)

The admission of a student with an infectious disease identified by state health officials shall be determined by the Superintendent or designee according to standard health procedures. The Superintendent or designee shall consult with the student's parent/guardian and, as required, with the student's physician and/or the local health department.

(cf. 5112.2 - Exclusions from Attendance)

(cf. 5141.3 - Health Examinations)

Students with Bloodborne Pathogen Infections

Note: Under 4 AAC 06.060, a student diagnosed with AIDS or HIV does not have a condition that 'will cause the attendance of the child to be inimical to the welfare of other pupils,' as required for the suspension or removal of a student due to a medical condition under AS 14.30.045. A student's removal because of AIDS or HIV is only allowed if the student has uncoverable oozing lesions or other symptoms, or displays behavior, such as biting, which in the opinion of a team, substantially increases the risk of transmission to other pupils. That team must be made up of the student's physician, public health personnel, the parent or guardian, and school personnel associated with the child's placement.

Students with bloodborne pathogens are entitled to the rights and services accorded to other students. The sole presence of bloodborne pathogens is not sufficient reason to exclude students from attending school. Parents/guardians of students whose educational performance is adversely affected by an infectious disease are encouraged to inform the Superintendent or designee so that any such child will have access to appropriate district programs and services. The Superintendent or designee shall convene a review panel to make recommendations regarding appropriate programs and services for the student.

The Superintendent or designee shall ensure that all of the student's rights to confidentiality are strictly observed in accordance with law.

Note: We recommend that written releases from the student's parent/guardian be requested on behalf of all review panel members.

The Superintendent or designee shall request that parents/guardians sign a release form to provide confidential medical information and records to the review panel.

**IDITAROD AREA SCHOOL DISTRICT
DATE OF ADOPTION: December 2014**

Students

INFECTIOUS DISEASES (continued)

BP 5141.22 (b)

Legal Reference:

ALASKA STATUTES

14.30.045 Grounds for suspension or denial of admission

ALASKA ADMINISTRATIVE CODE

4 AAC 06.060 Suspension or denial of admission

4 AAC 06.150 Confidentiality of AIDS information

FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT

20 United States Code, 1232g

NONDISCRIMINATION UNDER REHABILITATION ACT OF 1973

20 United States Code, 794

Revised 12/04

**IDITAROD AREA SCHOOL DISTRICT
DATE OF ADOPTION: December 2014**

Students

INFECTIOUS DISEASES

AR 5141.22 (a)

The Superintendent or designee shall consult with local health officials regarding the criteria for determining the admission or exclusion of a child with a suspected or diagnosed infectious disease. If necessary, the Superintendent or designee shall obtain a written statement from the student's physician that the child does not pose a risk of infection to other students and district personnel.

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.

Note: Depending upon the source, the contents and format of a written consent for disclosure form may be governed by law. Decisions regarding disclosure should be made with legal counsel.

Note: The American Academy of Pediatrics does not recommend requiring disclosure of a student's HIV status as no cases of HIV transmission have been reported in the school setting. According to the Academy, knowledge of a student's HIV status is unnecessary for school entry and disclosure should not be required. The decision to disclose HIV infection status should be made in the best interests of the child and is the responsibility of the parents, who may want to include the child's pediatrician in the decision-making. When a decision is made to notify the school that a child is HIV-positive, the number of persons aware of the child's infection can be limited so that the information is disclosed only to those who need such knowledge to care for the child. This recommendation does not imply that the classroom teacher must be notified. See American Academy of Pediatrics, Committee on Pediatric AIDS and Committee on Infectious Disease, *Issues Related to HIV Transmission in Schools, Child Care, Medical Settings, the Home, and Community*.

Students with Infections or Special Susceptibility to Infection

1. Before a review panel is convened to develop recommendations for the appropriate placement of students with infections or special susceptibility to infection, the Superintendent or designee shall obtain a written statement from the child's parent/guardian authorizing the Superintendent or designee and the health officer to obtain confidential information from the student's physician and any other source of pertinent medical, psychological or educational information.
2. A review panel shall be convened, composed of:
 - a. The student's parent/guardian.
 - b. The student's physician.
 - c. The district's appointed medical consultant or public health official.

**IDITAROD AREA SCHOOL DISTRICT
DATE OF ADOPTION: December 2014**

Students

INFECTIOUS DISEASES (continued)

AR 5141.22 (b)

- d. The Superintendent or designee.
- e. Other appropriate school personnel.

Note: To maintain the strictest standards of confidentiality, districts should include on the review panel only those persons who have a need to know about the student's medical condition. Only the Superintendent or designee, parent/guardian and student's physician have an ongoing need to know the student's identity. The Superintendent's designee, the district's appointed medical consultant, public health official and other appropriate school personnel do not always need to know the infected person's name. They may study the facts of the case and reach a decision without knowing the student's identity.

- 3. Upon collecting the required authorizations and statements, the review panel shall evaluate placement options for the child. The panel shall consider:
 - a. The age, physical condition, neurological development and behavior of the infected student.
 - b. The expected type of interaction with others in the school environment.
 - c. Risks to the student.
- 4. The review panel shall provide the Superintendent or designee with recommendations regarding the student's placement in regular classes or in an alternative educational program. The panel is encouraged to recommend alternative programs:
 - a. When a question exists as to whether transfer of infection may occur due to:
 - (1) Uncoverable oozing lesions.
 - (2) Inability to safely control bodily secretions.
 - (3) Behavior.
 - b. When the student is at high risk of acquiring a secondary infection.
 - c. When the student has a significant health problem that permanently restricts his/her ability to attend class.

Students

INFECTIOUS DISEASES (continued)

AR 5141.22 (c)

5. The review panel shall also develop a written plan recommending procedures for personal care and for modification, if necessary, of the student's academic program. The panel shall review this plan regularly to determine any need for changes in placement, care or services.
6. The identity of a student with infection and/or special susceptibility to infection shall be held in confidence. Review panel members shall not share this confidence with anyone outside the panel except in accordance with law.
7. When infections such as chicken pox, cytomegalovirus, herpes simplex, tuberculosis or measles occur at school, the Superintendent or designee shall so inform the student's parent/guardian and physician, so that the physician who is aware of the student's immune status may assess the student's risks from exposure to these infections.

Revised 12/04

**IDITAROD AREA SCHOOL DISTRICT
DATE OF ADOPTION: December 2014**

Students

INFECTIOUS DISEASE PREVENTION

BP 5141.23

Note: Pursuant to the Code of Federal Regulations 29 CFR 1910.1030, employers with one or more employees having occupational exposure to bloodborne pathogens must enforce universal precautions to prevent contact with blood or other potentially infectious materials. The following policy addresses the need for students to follow the same procedures.

The Iditarod School 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.

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. 4119.41 - Infectious Diseases)

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

(cf. 4119.43 - Universal Precautions)

(cf. 5141.31 - Immunizations)

(cf. 6142.2 - AIDS Instruction)

Revised 9/93

**IDITAROD AREA SCHOOL DISTRICT
DATE OF ADOPTION: December 2014**

Students

INFECTIOUS DISEASE PREVENTION

AR 5141.23

Science Laboratory Instruction

Before a class works with blood or blood products, the teacher must explain the potentially hazardous nature of blood, emphasizing the fact that through blood, various agents can be transmitted from one person to another. Before and after doing laboratory work, students must always wash hands with soap and water, dry hands, and cover any existing cut, wound, or open sore with a sterile dressing. The following techniques also must be used when students are working with human blood:

1. Specific procedures and safety precautions shall be explained carefully before starting each laboratory exercise.
2. Wherever possible, blood typing experiments shall be conducted by teacher demonstrations rather than being performed by individual students.
3. Students always shall work with their own blood, or shall use prepackaged ABO/Rh blood cell kits that have vials of blood previously tested for transmissible agents.
4. Students shall use individual sterile lancets for finger punctures, and lancets must not be reused.
5. Before the finger is punctured, it shall be wiped with alcohol or other approved disinfectant.
6. If bleeding persists after the finger is punctured, the student shall apply a sterile bandage using moderate pressure.
7. Lancets and any other materials with blood on them must be discarded into sharps containers that will be incinerated by the hospital.
8. At the end of the class, laboratory desks shall be wiped with one to ten dilution of bleach or other approved disinfectant.

Techniques similar to the above shall be used when working with any other body fluids.

Revised 12/04

**IDITAROD AREA SCHOOL DISTRICT
DATE OF ADOPTION: December 2014**

Students

INFECTIOUS DISEASE PREVENTION

E 5141.23 (a)

Precautions for Infectious Disease Prevention

Note: The following precautions should be established to prevent potential exposures to infectious diseases, whether or not casually transmitted.

Handwashing is the single most important technique for preventing the spread of casually transmitted diseases. Hands should be washed thoroughly for 15 to 30 seconds with soap and warm running water, rinsed under running water, and thoroughly dried with paper towels:

1. Before eating, drinking or feeding.
2. Before handling food, clean utensils or kitchen equipment.
3. Before and after using the toilet or diapering.
4. After accidental contact with body secretions such as blood, urine, feces, mucus, saliva or drainage from wounds, or with soiled garments, equipment, diapers or menstrual pads.

Nonsterile disposable gloves should be worn when handling blood (such as providing care for nosebleeds, bleeding gums, cuts or wounds); blood-soiled items (such as menstrual pads, bandages or clothing); secretions (particularly from open sores or wounds); vomit, urine or feces; as well as surfaces, materials, and objects exposed to them.

Gowns or smocks should be worn if soiling of clothing by body fluids, secretions or excretions is anticipated. Hands should be washed thoroughly after removing gowns or gloves.

Personnel and students with open skin lesions (such as chapped or broken skin, eczema, sores, cuts or wounds) should particularly avoid contact with blood, blood-soiled items, or secretions, and should cover their lesions with occlusive dressings or gloves when possible.

Extraordinary care should be taken to prevent accidental wounds from potentially contaminated sharp instruments such as needles, scissors, or knives.

Food and drinks should not be shared. Separate eating utensils, glasses and cups should be used.

Sanitary conditions should be maintained throughout the facility, with established routines for frequently cleaning floors, sinks, faucets, table tops, door knobs, etc.

**IDITAROD AREA SCHOOL DISTRICT
DATE OF ADOPTION: December 2014**

Students

INFECTIOUS DISEASE PREVENTION (continued)

E 5141.23 (b)

Precautions for Infectious Disease Prevention (continued)

Surfaces contaminated with body secretions should be washed with soap and water and disinfected promptly with a freshly prepared solution of bleach (ten parts water to one part bleach) or other approved disinfectant. Disposable towels should be used whenever possible, and mops should be rinsed in the bleach solution.

Articles and clothing soiled with blood, vomit, feces, urine or other body discharges should be placed in leak-proof plastic bags for proper disposal or washing.

Revised 12/04

**IDITAROD AREA SCHOOL DISTRICT
DATE OF ADOPTION: December 2014**

Students

IMMUNIZATIONS

BP 5141.31

Note: Effective July 1, 2009, school children must be immunized against varicella.

Prior to first entry into school, a child must be fully immunized as required by law against diphtheria, pertussis, tetanus, polio, measles, rubella, mumps, hepatitis A, hepatitis B, and varicella. Children over the age of 12 shall not be required to be immunized against rubella (4 AAC 06.055).

Any student who does not show evidence of required immunization or who does not present a letter or affidavit from the parent/guardian or physician, physician's assistant, or advanced nurse practitioner stating reasons for exemption based on medical reasons or personal beliefs, shall be excluded from school until such time as the immunization is obtained or affidavit of exemption has been filed with the school.

The Superintendent or designee shall exclude those students who fail to meet immunization requirements as required by law.

Provisional Admission

Where regular weekly medical services are not available, the Superintendent or designee may grant provisional admission to students in exceptional circumstances for up to 90 days.

(cf. 5112.2 - Exclusion)

Note: Pursuant to 4 AAC 06.055 immunizations must be provided by state or federal health services if otherwise unavailable in the district or if unaffordable.

Provisional admissions shall be reported to the Department of Health and Social Services. The Superintendent or designee shall inform parents/guardians of available immunization services and state or federal assistance.

Legal Reference:

ALASKA STATUTES

14.30.065 Supervision

14.30.125 Immunization

ALASKA ADMINISTRATIVE CODE

4 AAC 06.055 Immunizations required

Revised 1/09

**IDITAROD AREA SCHOOL DISTRICT
DATE OF ADOPTION: December 2014**

Students

CHILD ABUSE AND NEGLECT

BP 5141.4

Note: AS 14.08.111 and AS 14.14.090 require districts to provide mandatory reporters training in the recognition and reporting of child abuse and neglect. Pursuant to AS 47.17.020, teachers, school administrators, and paid athletic coaches are mandated to report child abuse and neglect.

With concern for the well-being of each student, teachers, school administrators, and paid athletic coaches shall be trained on the recognition and reporting of child abuse and neglect in accordance with state law. District employees shall cooperate with the child protective agencies responsible for reporting, investigating and prosecuting cases of child abuse.

In addition to the required training provided above, the Superintendent or designee may invite classified personnel who have regular contact with students to participate in child abuse and neglect training. Classified personnel should immediately report instances of suspected child abuse or neglect to the site administrator.

Note: Pursuant to AS 47.17.068, failing to report child abuse or neglect mandated by law is a misdemeanor if the person knew or should have known that circumstances gave rise to the need for a report.

Legal Reference:

ALASKA STATUTES

14.08.111 Duties (Regional school boards)

14.14.090 Additional duties

47.17.010-47.17.070 Child protection

Revised 4/2014

**IDITAROD AREA SCHOOL DISTRICT
DATE OF ADOPTION: March 2015**

Students

CHILD ABUSE AND NEGLECT

AR 5141.4 (a)

Duty to Report

Teachers, school administrators, and paid athletic coaches who have reasonable cause to suspect child abuse or neglect have a legal duty to report to the nearest office of the Department of Health and Social Services immediately. The reporting duties are individual and cannot be delegated to someone else.

Reporting Procedures

Note: AASB recommends that your administrative regulation include the name, address and phone number of the specific child protective agencies and law enforcement to whom reports must be made.
--

1. Any employee may report known or suspected child abuse or neglect, by telephone to the nearest office of the Department of Health and Social Services. This phoned report must be followed by a faxed or electronically submitted written report of harm.
2. If contact cannot reasonably be made with child protective services and immediate action is needed to protect the child, the employee shall make the report to a peace officer.
3. In addition to reporting to child protective services, employees may report harm from known or suspected child abuse or neglect to local law enforcement and tribal authorities if the harm is believed to have been caused by a person not responsible for the child's welfare or if the employee is unable to determine who caused the harm or whether the person believed to have caused the harm has responsibility for the child's welfare.
4. School employees are required to cooperate and collaborate with child welfare agencies and law enforcement to provide the pertinent information needed to protect the health and safety of children.
5. School district employees should not contact suspects, nor should the victim be interviewed beyond the initial information disclosed.

**IDITAROD AREA SCHOOL DISTRICT
DATE OF ADOPTION: March 2015**

Students

CHILD ABUSE AND NEGLECT (continued)

AR 5141.4 (b)

Legal Responsibility and Liability

1. School employees are not civilly or criminally liable for filing in good faith, a required or authorized report of known or suspected child abuse or neglect, or for participating in related investigative or judicial proceedings.
2. A mandatory reporter who fails or refuses to report an instance of child abuse or neglect and knew or should have known that the circumstances gave rise to the need for a report, is guilty of a misdemeanor.
3. When two or more mandatory reporters have reasonable cause to suspect child abuse or neglect, and when there is agreement among them, the report may be made by any one of them who is selected by mutual agreement, and a single report may be made and signed by the person selected. However, if any person who knows or should know that the person designated to report failed to do so, that person then has a duty to make the report.
4. The duty to report child abuse and neglect is an individual duty and no supervisor or administrator may impede or inhibit such reporting duties. Furthermore, no person making a good faith report shall be subject to any sanction.

(cf. 5145.11 - Questioning and Apprehension)

Confidentiality

All school district employees are required to protect students' rights to privacy and confidentiality. As such, all information and reports regarding child abuse or neglect shall be treated as confidential and shall be maintained in a safe place. No employee shall make available, or allow access to the written information to other students, staff or members of the public, except as required by school rule, Board Policy or law.

The principal/principal-teacher shall maintain the confidentiality of all reports of child abuse and neglect received, other than making the reports available to the appropriate agencies to which the reports were initially made. The principal/principal-teacher shall make provisions to protect and to maintain as confidential, the identity of the employee or employees making the report.

Revised 4/2014

**IDITAROD AREA SCHOOL DISTRICT
DATE OF ADOPTION: December 2014**

Students

CHILD ABUSE PREVENTION

BP 5141.41

Every child has the right to live free of physical and emotional abuse, including neglect and sexual assault. The Iditarod School Board recognizes that such abuse has severe consequences for the child, sometimes resulting in the child's own violent behavior or in drug addiction. Schools are in a position to promote the prevention of child abuse and its reoccurrence, and to reduce the general vulnerability of children.

Age-appropriate and culturally-appropriate child abuse prevention curriculum shall be a component of the district's health and safety instruction. This curriculum shall explain students' rights to live free of abuse, inform them of available support resources, and teach them how to obtain help and disclose incidents of abuse. The curriculum also shall include training in self-protection techniques.

The Superintendent or designee shall provide coordinated training for teachers who will use the child abuse prevention curriculum, including instruction in the physical and behavioral indicators of abuse, crisis counseling techniques, community resources, rights and responsibilities to report abuse or neglect, and care for a child's needs after a report is made.

(cf. 5141.4 - Child Abuse and Neglect)

The Superintendent or designee shall seek to incorporate community resources into the schools' child abuse prevention programs. To the extent feasible, the Superintendent or designee shall also use these community resources to provide parents/guardians with instruction in parenting skills and child abuse prevention.

Note: Educators may be invited to serve on a multidisciplinary child protection team, if determined appropriate by a consensus of the team. AS 47.14.300
--

(cf. 1020 - Youth Services)

(cf. 6142.1 - Family Life/Sex Education)

Legal Reference:

ALASKA STATUTES

14.30.360 Curriculum (Health and Safety Education)

Revised 3/2015

IDITAROD AREA SCHOOL DISTRICT
DATE OF ADOPTION: April 2015

Students

AT-RISK YOUTHS

BP 5141.51

The Iditarod School Board believes that, in order to benefit from a learning environment, students must be as free as possible from the dilemma imposed by personal and societal problems. Danger signs for the various at-risk categories must be taken seriously. District personnel must be concerned for the personal development of students, as well as their academic development.

The Superintendent or designee shall investigate and recommend programs which will address the needs of at-risk youths. At-risk youths include, but are not limited to, those students who abuse drugs or alcohol, are suicidal, exhibit serious attendance problems, drop out of school, are abused or disadvantaged children, or are pregnant or parenting minors.

Program planning should examine, but is not limited, to the following:

1. Classroom learning experiences and the integration of primary prevention programs into the classroom.
2. Staff development requirements.
3. District liability.
4. Community resources.
5. Crisis response/intervention teams.
6. Peer counseling.
7. Parent/guardian education.
8. Student Study Teams.
9. Kindergarten through 12 counseling and guidance curriculum.
10. Attendance and policy procedures.
11. Student discipline.
12. Alternative programs.

(cf. 5131.6 - Drugs, Alcohol and Tobacco)

(cf. 5141.4 - Child Abuse and Neglect)

(cf. 5141.52 - Suicide Prevention)

(cf. 5146 - Married/Pregnant/Parenting Students)

(cf. 5147 - Dropout Prevention Program)

(cf. 5148 - Child Care)

**IDITAROD AREA SCHOOL DISTRICT
DATE OF ADOPTION: December 2014**