4640 Barger Drive • Eugene, OR 97402 • Phone: (541) 689-3280

Fax: (541) 689-0719 • www.bethel.k12.or.us



BETHEL SCHOOL BOARD MEETING

District Office – 4640 Barger Drive Monday, February 26, 2018 7:00 p.m.

AGENDA

Executive Session per ORS 192.660(2)(d) – Labor Negotiations – Toward the end of the meeting. At the end of the Executive Session the Board will call the Regular Session to order and open to the public.

1. Call to Order Dawnja Johnson, Chair

2. Pledge of Allegiance Debi Farr, Vice Chair

3. Approval of Minutes

4. Superintendent's Report

- A. Student Presentation, Clear Lake Elementary School
- B. Willamette High School Culinary Team
- C. Student Representative Reports, KHS and WHS
- D. Open Enrollment Update, Pat McGillivray
- E. Equity Committee Update, Tina Gutierez-Schmich
- F. Instructional Hours Review
- G. Financial Statement, Simon Levear
- H. Legislative & School Finance Update
- I. Policy & Administrative Rule Update, 1st Reading
 - a. JHCD/JHCDA Prescription/Nonprescription Medication Updated to reflect new language
 - b. JHCD/JHCDA-AR Administering Noninjectable/Injectable Medicines to Students *Updated to reflect new language*
 - c. EBBB Injury/Illness Reports Updated to reflect new language

J.

5. Delegations and Visitors

6. Consent Agenda

Personnel Action Resolution No. 38

BETHEL SCHOOL DISTRICT #52 BOARD OF DIRECTORS

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7. Action Items

A. Approve Additional Instructional Hours under OAR 581-022-1620

Resolution No. 37

B. Approve Open Enrollment Caps for the 2018-2019 School Year

Resolution No. 39

C. 2018-2019 Employee Contracts
(Lists distributed at Board Meeting)

D.

8. Information and Discussion

- A. NSBA Annual Conference, April 7-9, 2018
- В.

9. Board Activity Update

A.

10. Review of Next Meeting: Monday, March 12, 2018

- A. Student Presentation, Meadow View School
- B. Student Representative Reports, KHS and WHS
- C. Health and Human Sexuality Report
- D. Legislative & School Finance Update
- E. Board Policies & Administrative Rules Up for Periodic Review

F.

11. The Board will meet in Executive Session per ORS 192.660(2)(d) to discuss labor negotiations.

12. Return to Regular Session

13. Adjournment

ATTENDANCE

<u>Board Members</u>: Alan Laisure, Ginger Poage, Rich Cunningham, Debi Farr, Greg Nelson, and Chair, Dawnja Johnson

Absent: Paul Jorgensen

District staff, students, and community members identified: Superintendent Parra, Pat McGillivray, Simon Levear, Remie Calalang, Brian Flick, Christy Gill, Amy Tidwell, Tina Gutierez-Schmich, Stefan Aumack, Mindy LeRoux, Maureen Spence, Rachel Hsieh, Carey Killen, Jill Robinson-Wolgamott, Judy Rue-Kethcart, Marilyn Bounds, Tony Scurto, Marissa Morris, Janay Stroup, Georgeann Harty, Robin Hanson, Joshua Caudle, Kirsten Hall, Elijah Hendrickson, Logan Nichols, Esther Sampayo Chavez, Alaina Smedstad, Heather Quaas-Annsa, Craig Annsa, Rebecca Berry, Tiffany Taylor, Tausha Hughes, Lance Hughes, Brandy Simmons, Gene Longacre, Susan Green, Kayla Green, Laurie Aley, Kathryne Rich, Judy Chesser, Shannon Spicer, Sonya McNurlin, Melinda Greenblatt, Danielle Conrad, Brian Conrad, Chris Ausborn, Stephanie Wamsley, Ryan Hosek, Susan Kauble, Rachel Hansen, Tara Bedney, LTC Charles Elis, Nicole Butler, Heather Zandhuisen, Kellie Lee, Melissa Inman, Destiny Nethercutt, approximately 100 community members and Jill Busby

CALL TO ORDER

Chair Johnson called the February 12, 2018, Meeting of the Board of Directors to order at 7:01 p.m.

PLEDGE OF ALLEGIANCE

Vice Chair Farr led the Pledge of Allegiance.

ACTION ON MINUTES

Chair Johnson presented the Minutes from the January 22, 2018, Board Meeting and asked for additions or corrections. Hearing none, the Board approved the Minutes as submitted.

Chair Johnson acknowledged the large number of community members present for public comment and stated that board discretion would be used to limit the Delegations and Visitors portion of the agenda to approximately 20 minutes. Chair Johnson suggested that a single spokesperson be selected if several people are addressing the same topic or sentiment, and stated that the Board is interested in hearing all viewpoints.

SUPERINTENDENT'S REPORT

Student Presentation, Malabon Elementary School

Superintendent Parra introduced Malabon Elementary School Principal Maureen Spence. Ms. Spence introduced 4th grade Teacher Rachel Hsieh and shared that 4th and 5th grade students at Malabon have been working with a Coder-in-Residence as part of Lane STEM's Coder-in-Residence program. Ms. Hsieh described the Coder-in-Residence program. Students Alaina Smedstad, Esther Sampayo Chavez, Logan Nichols, and Elijah Hendrickson shared their experiences learning to code and demonstrated their programming skills with their Gigabots.

WHS Student Representative Report

Juanita and Brandon were both involved with other school activities and were not able to attend the meeting, but were able to provide a written summary of events at Willamette. Superintendent Parra read the summary aloud. The boys basketball senior night was on February 9th and Willamette won in overtime against Roseburg, 47-41. The district swim meet was held last week at Willamalane. The new semester recently began and enrollment has increased. T-Crew members have been available to assist new students and there was a luncheon held last week to welcome the new students. Upcoming events at Willamette include Spring Fling, Wolverine Pageant on March 17th, Prom on May 5th, and Graduation on June 8th.

Superintendent Parra was unable to continue her report. The audience vocalized their opposition to not being able to fit into the Board room, hear the content of the meeting, and for having comments limited.

ADJOURNMENT

Chair Johnson adjourned the meeting at 7:19 p.m.

RECONVENE THE REGULAR SESSION

Chair Johnson reconvened the February 12, 2018, Meeting of the Board of Directors at 7:56 p.m. in an effort to schedule a public comment meeting and determine the best course of action for current agenda items before the Board that were time sensitive.

Lane ESD Superintendent Scurto Introduction

Superintendent Parra introduced new Lane ESD Superintendent Tony Scurto to the Board.

EXECUTIVE SESSION per ORS 192.660(2)(e)

Chair Johnson moved the Board into Executive Session at 7:57 p.m. to negotiate real property.

RETURN TO REGULAR SESSION

Chair Johnson returned the Board to Regular Session at 8:15 p.m.

The Board discussed scheduling a Special Board Meeting to hear public comment regarding celebrations in schools. It was decided that a Special Board Meeting would be held Thursday, February 15, 2018, at 7:00 p.m. The venue will be determined.

Superintendent Parra completed her brief update on recent weekend events in the District including No One Eats Alone Day, the VEX Robotics Tournament and the Chess Tournament, the Recycling Round Up, and a visit from Beijing school No. 159, Shasta's sister school. Superintendent Parra also shared a photo of a Bethel student who had the opportunity to hand the game ball to the referee at the UO men's basketball game the previous night. Superintendent Parra thanked Trillium for their support of No One Eats Alone Day.

Equity Committee Update, Tina Gutierez-Schmich

This agenda item was postponed to the February 26, 2018, Board Meeting.

Graduation Rates, Brian Flick

Superintendent Parra reviewed a document prepared by Director of Teaching and Learning Brian Flick summarizing statistical data related to the District's 4-year and 5-year graduation rates and shared steps the District is taking to increase graduation rates.

Instructional Hours Review

This agenda item was postponed to the February 26, 2018, Board Meeting.

Financial Statement, Simon Levear

This agenda item was postponed to the February 26, 2018, Board Meeting.

Legislative & School Finance Update

The majority of this agenda item was postponed to the February 26, 2018, Board Meeting. Superintendent Parra briefly reported on education items currently before the legislature.

Policy & Administrative Rule Update, 1st Reading

This agenda item was postponed to the February 26, 2018, Board Meeting.

DELEGATIONS AND VISITORS

A public comment meeting was scheduled on Thursday, February 15 to hear comments from the visitors who were unable to present.

CONSENT AGENDA

Resolution No. 34 - Personnel Action

Motion: Greg Nelson moved, Debi Farr seconded, to approve the Consent Agenda as specified below:

#	Name	Туре	Description
1.	Davis, George	Hire for 2017-18	Offer Extra Duty Contract for Junior
			Varsity Baseball Coach @
			Willamette.
2.	Martinez, Jake	Hire for 2017-18	Offer Extra Duty Contract for Junior
			Varsity Baseball Coach @
			Willamette.
3.	Mortensen, Greg	Hire for 2017-18	Offer Extra Duty Contract for Junior
			Varsity Baseball Coach @
			Willamette.
4.	Rodriguez, Juan	Hire for 2017-18	Offer Extra Duty Contract for Junior
			Varsity Head Softball Coach @
			Willamette.
5.	VansCoy, Devin	Hire for 2017-18	Offer Extra Duty Contract for
			Distance Running Track Coach @
			Willamette.

Motion Passed, 6-0 Absent: Paul Jorgensen

ACTION ITEMS

Resolution No. 35 – Adopt Policy GCBDC

Motion: Ginger Poage moved, Rich Cunningham seconded, to approve the adoption of the above policy.

Motion Passed, 6-0 Absent: Paul Jorgensen

Resolution No. 36 – Approve Policy JGAB

Motion: Alan Laisure moved, Debi Farr seconded, to approve the adoption of the above policy.

Motion Passed, 5-1

Director Cunningham voted against Resolution No. 36.

Absent: Paul Jorgensen

Resolution No. 37 – Approve Additional Instructional Hours under OAR 581-022-1620

No action taken.

INFORMATION AND DISCUSSION

- A. 22nd Annual Airport Rotary Foundation Dinner & Auction, Friday, February 23, 5:30pm, Valley River Inn
- B. NSBA Annual Conference, April 7-9, 2018

BOARD ACTIVITY UPDATE

None

REVIEW OF NEXT MEETING: MONDAY, FEBRUARY 26, 2018

- A. Student Presentation, Clear Lake Elementary School
- B. Willamette High School Culinary Team
- C. Open Enrollment Update, Pat McGillivray
- D. Employee Contracts for 2018-2019
- E. Legislative & School Finance Update
- F. Board Policies & Administrative Rules Up for Periodic Review

ADJOURNMENT

There being no further business to bring before the Board, Chair Johnson adjourned the meeting at 8:51 p.m.

Clerk – Chris Parra	Chair – Dawnja Johnson
jcb	

BETHEL SCHOOL DISTRICT **INSTRUCTIONAL HOURS**

2018-2019 SCHOOL YEAR

(OAR 581-022-1620)

Minimum Required Hours of Instruction:

K, 1, 2, 3, 4, 5, 6, 7, 8 = 900 hours 9, 10, 11 = 990

12 = 966 hours

CLEAR LAKE

GRADE	MINUTES	TOTAL HOURS
K	295	956.5
1	310	1000.5
2	310	1000.5
3	310	1000.5
4	310	940.5
5	310	940.5

DANEBO

GRADE	MINUTES	TOTAL HOURS
K	295	958.3
1	310	1000.5
2	310	1000.5
3	310	1000.5
4	310	940.5
5	310	940.5

FAIRFIELD

GRADE	MINUTES	TOTAL HOURS
K	295	958.3
1	310	1000.5
2	310	1000.5
3	310	1000.5
4	310	940.5
5	310	940.5

IRVING

		TOTAL
GRADE	MINUTES	HOURS
K	295	958.3
1	310	1000.5
2	310	1000.5
3	310	1000.5
4	310	940.5
5	310	940.5

MALABON

GRADE	MINUTES	TOTAL HOURS
K	295	958.3
1	310	1000.5
2	310	1000.5
3	310	1000.5
4	310	940.5
5	310	940.5

MEADOWVIEW

		TOTAL
GRADE	MINUTES	HOURS
K	300	956.5
1	310	1000.5
2	310	1000.5
3	310	1000.5
4	310	940.5
5	310	940.5
6	312	946.6
7	312	946.6
8	312	946.6

PRAIRIE MOUNTAIN

		TOTAL
GRADE	MINUTES	HOURS
K	295	956.2
1	310	1000.5
2	310	1000.5
3	310	1000.5
4	310	940.5
5	310	940.5
6	316	958.4
7	316	958.4
8	316	958.4

CASCADE

GRADE	MINUTES	TOTAL HOURS
6	330	999.1
7	330	999.1
8	330	999.1

SHASTA

		TOTAL
GRADE	MINUTES	HOURS
6	330	999.2
7	330	999.2
8	330	999.2

KALAPUYA

GRADE	TOTAL HOURS
10	1004
11	1004
12	1004

WILLAMETTE

GRADE	TOTAL HOURS
9	1048.8
10	1018.8
11	1018.8
12	992.4

Bethel School District GENERAL FUND Revenue and Expenditure Summary/Projection (unaudited) Fiscal Year 2017/2018



													Projected			YTD	YTD	
	Actual	Actual	Actual	Actual	Actual	Actual	Preliminary	Projected	Projected	Projected	Projected	Projected	2017/2018	2017/2018	Budget	Actual	Projected	
	July 2017	Aug 2017	Sept 2017	Oct 2017	Nov 2017	Dec 2017	Jan 2018	Feb 2018	March 2018	April 2018	May 2018	June 2018	Totals	ADOPTED BUDGE	Variance	Jan 2018	Jan 2018	Variance
<u>R E V E N U E S</u>																		
LOCAL SOURCES:																		
Current year's levy* R1111	0	0	0	0	8,633,998	5,116,459	279,089	74,119	412,122	55,558	54,631	402,907	15,028,883	15,222,447	-193,564	14,029,547	14,223,110	(193,564)
Prior years' taxes* R1112 & 1190 & 1200	0	0	41,903	32,225	29,794	20,041	21,123	3,446	1,266	3,498	3,695	16,579	173,572	58,000	115,572	145,087	29,515	115,572
Tuition from other Districts	0	0	0	0	762	2,285	0	0	0	0	0	0	3,047	0	3,047	3,047	0	3,047
Investment earnings R1510	16,091	19,035	17,782	17,570	18,834	31,107	35,387	13,385	11,654	11,518	12,774	7,765	212,904	110,000	102,904	155,807	52,903	102,904
Misc. local sources R1910 & R1940 & R196	15,883	4,990	5,284	51,561	2,561	1,228	-2,646	719	1,350	1,903	24,334	9,251	116,417	44,300	72,117	78,860	6,744	72,117
Subtotal	31,974	24,025	64,970	101,356	8,685,949	5,171,120	332,954	91,668	426,393	72,477	95,434	436,502	15,534,822	15,434,747	100,075	14,412,348	14,312,272	100,075
INTERMEDIATE SOURCES:																		
County School Fund* R2101	0	0	0	0	0	0	0	0	0	0	0	60,000	60,000	60,000	0	0	0	0
Subtotal	0	0	0	0	0	0	0	0	0	0	0	60,000	60,000	60,000	0	0	0	0
STATE SOURCES:																		
SSF- Current Year R3101	6,318,731	3,157,468	3,157,468	3,157,468	3,157,484	3,157,567	3,157,567	3,187,898	3,156,822	3,162,282	3,005,110	-7	37,775,859	37,925,738	-149,879	25,263,754	25,413,633	(149,879)
Common School Fund* R3103	0	0	0	0	0	0	0	339,314	0	0	0	339,314	678,628	678,627	1	0	0	0
High Cost Disability	0	0	0	0	0	0	0	0	0	0	80,000	0	80,000	80,000	0	0	0	0
Other State Funds	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Subtotal	6,318,731	3,157,468	3,157,468	3,157,468	3,157,484	3,157,567	3,157,567	3,527,212	3,156,822	3,162,282	3,085,110	339,306	38,534,486	38,684,365	-149,879	25,263,754	25,413,633	(149,879)
FEDERAL SOURCES:																		
Other Federal Grants 4700	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Federal Forest Fees* R4801	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Subtotal	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
OTHER RESOURCES:																		0.4.000
Interfund Transfers In R5200	0	0	0	0	0	24,233	0	350,000	0	0	0	0	374,233	350,000	24,233	24,233	0	24,233
Beginning fund balance R5400	6,078,226	0	0	0	0	0	0	0	0	0	0	0	6,078,226	4,457,000	1,621,226	6,078,226	4,457,000	1,621,226
Contactal	6.070.000		0			24 222		250,000					C 450 450	4 007 000	4 645 450	C 402 450	4 457 000	1 001 000
Subtotal	6,078,226	0	0	0	0	24,233	0	350,000	0	0	U	0	6,452,459	4,807,000	1,645,459	6,102,459	4,457,000	1,621,226
Total, monthly revenues	12,428,931	3.181.494	3.222.438	3.258.824	11.843.433	8.352.921	3,490,521	3.968.881	3.583.214	3.234.759	3,180,544	835.809						
CUMULATIVE RESOURCES	12,428,931	15,610,425	18.832.863	22.091.686	33,935,120	42,288,040	45,778,561	49,747,442	-,,	56,565,415	59,745,959	60,581,768	60.581.768	58.986.112	1.595.656	45,778,561	44,182,906	1,571,422
COMOLATIVE RESOURCES	12,420,931	15,610,425	10,032,003	22,091,000	33,933,120	42,266,040	45,776,561	49,747,442	55,550,656	30,303,413	39,743,939	60,361,766	00,361,766	30,300,112	1,595,656	45,776,501	44,102,900	1,371,422
EXPENDITURES																		
Salaries- 100	344.600	580,674	2,034,015	2,374,765	2,427,029	2,342,824	2,236,749	2,390,973	2,409,295	2,267,227	2,424,940	5,580,424	27,413,516	27,091,600	321.916	12,340,656	12,312,268	28,388
Employee benefits- 200	283,175	420,177	1,482,897	1,651,354	1,682,621	1,692,122	1,565,916	1,678,347	1,715,440	1,662,447	1,709,027	3,768,138	19,311,659	19,365,580	-53,921	8,778,261	8,948,288	(170,028)
Purchased services- 300	88,933	455,372	244,271	406,047	442,309	531,675	560,925	391,278	484,114	506,967	470,529	1,066,737	5,649,156	5,734,730	-85,574	2,729,532	2,815,106	(85,574)
Supplies- 400	87,807	72,594	65,428	84,320	77,848	58,052	39,756	67,750	64,696	41,001	98,634	143,203	901,089	966,942	-65,853	485,805	551,658	(65,853)
Capital outlay- 500	0	89,898	79,567	9.106	17,623	62,157	-17.443	0.,.00	0.,000	0	193,420	126,580	560,908	320,000	240,908	240,908	0	240,908
Insurance/Dues/Other- 600	382,316	36,986	1.974	8.040	2,773	4.314	3,616	10,948	1,788	1.399	-47	1,280	455.386	405,683	49,704	440,019	390,315	49,704
Interfund Transfers	0	00,500	1,574	120,000	2,770	4,514	0,010	0,540	1,700	0,000	0	375,437	495,437	442,730	52,707	120,000	69,290	50,710
Contigency	· ·	· ·	0	0	0	0	0	0	0	0	0	0,10,401	,	3,658,848	02,.01	.20,000	55,250	55,7.5
Comaganay			· ·	· ·	Ü	Ü	Ü	Ü	•	· ·	· ·	· ·		0,000,010				
Total, monthly expend.	1,186,831	1,655,700	3,908,151	4,653,632	4,650,203	4,691,144	4,389,519	4,539,296	4,675,333	4,479,041	4,896,503	11,061,799	54,787,150	57,986,112	459,886	25,135,179	25,086,925	48,254
CUMULATIVE EXPENDITURES	1,186,831	2,842,531	6,750,682	11,404,314	16,054,517	20,745,661	25,135,179	29,674,475	34,349,808	38,828,849	43,725,351	54,787,150						
COMOLATIVE EXICEDITORES																		
Month-end Fund Balance	11,242,101	12,767,894	12,082,180	10,687,372	17,880,603	21,542,379	20,643,382	20,072,967	18,980,848	17,736,566	16,020,608	5,794,617	5,794,617	1,000,000				

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Subject: <u>Prescription/Nonprescr</u>	iption -Medications	
Policy Number: <u>JHCD/JHCDA</u>	Effective Date:	
Date of Original Policy and Revision	ns: <u>11/98, 6/01, 6/02, 12/07, 4/10</u>	
Cancels Policy No.:	Dated:	
Date of Next Review: 7/18		

POLICY

The district recognizes that administering of medication to students by designated, trained staff and self-medication by students may be necessary when the failure to take such medication would jeopardize the health of the student or the student would not be able to attend school if medication was not made available during school hours., at a school sponsored activity, under the supervision of school personnel, in before or after school care programs on school owned property and in transit to or from school-sponsored activities.

Prescription and Nonprescription Medication

Students may be permitted to take non-injectable prescription or nonprescription medication at school, on a temporary or regular basis.

When directed by a physician or other licensed health care professional, students in grades K-12 will be allowed to self-administer medication with signed parent/guardian authorization. Permission for self-administered medication may be revoked at any time if the student violates policy or medical protocol.

All requests for the district to administer medication to a student by designated, trained staff shall be made by the parent/guardian in writing. Requests shall include the written instructions of the physician for the administration of a prescription medication to a student or the written instructions of the parent/guardian for the administration of a nonprescription medication to a student. A prescription label will be deemed sufficient to meet the requirements for written physician instructions.

The district shall designate school staff authorized to administer medication to students. Training shall be provided as required by law.

The district reserves the right to reject a request to administer prescription or nonprescription medication when such medication is not necessary for the student to remain in school.

This policy and administrative regulation shall not prohibit, in any way, the administration of recognized first aid to students by district employees in accordance with established state law, Board policy and procedures.

The Superintendent or designee shall develop administrative regulations as needed to meet the requirements of law, Oregon Administrative Rules and for the implementation of this policy. Regulations will include provisions for student self-medication.

Prescription and Nonprescription medication will be handled, stored, monitored, disposed of and records maintained in accordance with established district regulations governing administering Prescription and Nonprescription medicines to students.

The Superintendent, or designee will ensure student health management plans are developed as required by training protocols, maintained on file and pertinent health information is provided to district staff as appropriate. Such plans will include provisions for responding to emergency situations while the student

is in school, at a school sponsored activity, under the supervision of school personnel, in before or afterschool care programs on school-owned property and in transit to or from school or school-sponsored activities.

The district recognizes that administering a medication to a student and/or permitting a student to administer a medication to themself, may be necessary when the failure to take such medication during school hours would prevent the student from attending school, and recognizes a need to ensure the health and well-being of a student who requires regular doses or injections of a medication as a result of experiencing a life-threatening allergic reaction or adrenal crisis¹, or a need to manage hypoglycemia, asthma or diabetes. Accordingly, the district may administer or a student may be permitted to administer to themself prescription (injectable and noninjectable) and/or nonprescription (noninjectable) medication at school.

The district shall designate personnel authorized to administer medications to students. Training shall be provided to designated personnel as required by law in accordance with guidelines approved by the Oregon Department of Education (ODE).

A current first-aid and CPR card is required for designated personnel.

When a licensed health care professional is not immediately available, personnel designated by the district may administer to a student, epinephrine, glucagon or another medication to a student as prescribed and/or allowed by Oregon law.

The district reserves the right to reject a request for district personnel to administer, or to permit a student to administer to themself, a medication when such medication is not necessary for the student to remain in school.

The superintendent and/or designee will require that an individualized health care plan and allergy plan is developed for every student with a known life-threatening allergy, and an individualized health care plan for every student for whom the district has been given proper notice of a diagnosis of adrenal insufficiency. Such a plan will include provisions for administering medication and/or responding to emergency situations while the student is in school, at a school-sponsored activity, under the supervision of school personnel, in a before-school or after-school care program on school-owned property and in transit to or from school or a school-sponsored activity.

A student may be allowed to self-administer a medication for asthma, diabetes, hypoglycemia or severe allergies as prescribed by an Oregon licensed health care professional, upon written and signed request of the parent or guardian and subject to age-appropriate guidelines. This self-administration provision also requires a written and signed confirmation the student has been instructed by the Oregon licensed health care professional on the proper use of and responsibilities for the prescribed medication.

A request to the district to administer or allow a student to self-administer prescription medication or a nonprescription medication that is not approved by the Food and Drug Administration (FDA) shall include a signed prescription and treatment plan from a prescriber² or an Oregon licensed health care professional.

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¹Under proper notice given to the district by a student or student's parent or guardian.

²A registered nurse who is employed by a public or private school, ESD or local public health authority to provide nursing services at a public or private school may accept an order from a physician licensed to practice medicine or osteopathy in another state or territory of the U.S. if the order is related to the care or treatment of a student who has been enrolled at the school for not more than 90 days.

A written request and permission form signed by a student's parent or guardian, unless the student is allowed to access medical care without parental consent under state law³, is required and will be kept on file.

If the student is deemed to have violated Board policy or medical protocol by the district, the district may revoke the permission given to a student to self-administer medication.

Prescription and nonprescription medication will be handled, stored, monitored, disposed of and records maintained in accordance with established district administrative regulations governing the administration of prescription or nonprescription medications to students, including procedures for the disposal of sharps and glass.

A process shall be established by which, upon parent or guardian written request, a back-up prescribed autoinjectable epinephrine is kept at a reasonably secure location in the student's classroom as provided by state law.

A premeasured dose of epinephrine may be administered by designated personnel to any student or other individual on school premises who a staff member believes, in good faith, is experiencing a severe allergic reaction, regardless of whether the student or individual has a prescription for epinephrine.

This policy shall not prohibit, in any way, the administration of recognized first aid to a student by district employees in accordance with established state law, Board policy and administrative regulation.

A school administrator, teacher or other district employee designated by the school administrator is not liable in a criminal action or for civil damages as a result of the administration of prescription and/or nonprescription medication, subject to state law.

A school administrator, school nurse, teacher or other district employee designated by the school administrator is not liable in a criminal action or for civil damages as a result of a student's self-administration of medication, when that person in good faith assisted the student in self-administration of the medication, subject to state law.

A school administrator, school nurse, teacher or other district employee designated by the school administration is not liable in a criminal action or for civil damages, when that person in good faith administers autoinjectable epinephrine to a student or other individual with a severe allergy, who is unable to self administer the medication, subject to state law.

The district and the members of the Board are not liable in a criminal action or for civil damages when a student or individual is unable to self-administer medication, when any person in good faith administers autoinjectable epinephrine to a student or individual, subject to state law.

The superintendent shall develop administrative regulations as needed to meet the requirements of law, Oregon Administrative Rules and the implementation of this policy.

Oregon Administrative Rules and the implem	icitation of this policy.	
REPORTS None.		
³ Subject to ORS 109.610, 109.640 and 109.675.		

ATTACHMENTS

None.

END OF POLICY

REFERENCES / COMMENTS

Legal Reference(s):

ORS 109.610 OAR 166-400-0010(17) ORS 109.640 OAR 166-400-0060(29) ORS 109.675 OAR 333-055-0000 to -0035 ORS 332.107 OAR 166 414 0010(22) (24) ORS 339.866 to -339.871 OAR 581-021-0037 ORS 339.867 OAR 581-022-0037 OAR 581 022 0705 ORS 339.869 ORS 339.870 OAR 851-047-0030 ORS 433.800-433.830 OAR 851-047-0040 ORS 475.005-475.285 OAR 581-022-2220

SB 1040 (2007)

Family Educational Rights and Privacy Act of 1974, 20 U.S.C. § 1232g (2017); Family Educational Rights and Privacy, 34 C.F.R. Part 99 (2017).

OREGON HEALTH AUTHORITY AND OREGON DEPARTMENT OF EDUCATION, *Medication Administration in Oregon Schools: A Manual for School Personnel* (2016).

Bethel Administrative Rule JHCD/JHCDA: Administering Medication to Students

JHCD/JHCDA. <u>Administering Noninjectable/Injectable Medicines to Students-Medications</u> Adopted:

School staff are designated annually by the building administrator to administer prescription and nonprescription medications. While the student is in school, at a school-sponsored activity, under the supervision of school personnel, in before or after-school care programs on school-owned property and in transit to or from school or school sponsored activities.

Prescription Medications

A written request for designated staff to administer prescription medication must be submitted to the school office and shall include:

- a. The written signed permission of the parent/guardian
- b. The written instruction from the physician, physician assistant, or nurse practitioner for the administration of the prescription medication to the student including:
 - Name of student
 - Name of medication
 - Dosage
 - Method of administration
 - Frequency of administration
 - Other special instructions, if any

The prescription label will be considered to meet this requirement if it contains the above listed information.

Non-Prescription Medications:

A written request for designated staff to administer nonprescription medication must be submitted to the school office and shall include:

- a.—The written signed permission of the parent/guardian
- b. The written instruction from the parent/guardian for the administration of the nonprescription medication to the student including:
- Name of student
- Name of medication
- Dosage
- Method of administration
- Frequency of administration
- Other special instructions, if any

Student Self-Medication of a Prescription Medication

- Self-medication of prescription medications by K-12 students, including students with asthma or severe allergies will be allowed in cases where a student must carry such medication on his/her person, if the student is developmentally and behaviorally able to self-medicate. The student's physician, the school nurse/building principal, and/or the parent/guardian will determine this.
 - a. A parent (guardian) signed permission form and other documentation requested by the district must be submitted for self-medication of all prescription medications;

- b. A prescription written by an Oregon licensed health care professional that includes a written treatment plan for managing of the student's asthma, diabetes and/or severe allergy.
- Each prescription medication must have a pharmacy label attached to the medication. A self-medication agreement/permission/instruction form may be required to allow the student to self-medicate depending on the student's behavioral and developmental level.
- All medication must be in its appropriately labeled, original container.
- Prescription labels must specify:
 - The name of the student
 - The name of the medication
 - → Dosage

 - Frequency and time of administration
 - Any other special instruction including permission for the student to self-medicate
- The student may have in his/her possession only the amount of medication needed for that school day except for manufacture's packaging that contains multiple dosage, the student may carry one package, such as but not limited to, auto-injectable epinephrine or bronchodilators/inhalers.
- Controlled substances, such as stimulants or narcotics, cannot be self-medicated.
- Sharing and/or borrowing of any medication with another student is strictly prohibited;
- For students who have been prescribed bronchodilators or epinephrine, staff will request from the parent or guardian, that the parent or guardian provide backup medication for emergency use by that student. Backup medication, if provided by the parent or guardian, will be kept at the student's school in a location to which the student has immediate access in the event the student has an asthma and/or severe allergy emergency;
- Upon written parent request and with a physician's written statement that the lack of immediate
 access to a backup autoinjectable epinephrine may be life threatening to a student, and the location
 the school stores backup medication is not located in the student's classroom, a process shall be
 established to allow the backup autoinjectable epinephrine to be kept in a reasonably secure location
 in the student's classroom;
- Permission to self-medicate may be revoked if the student violates the Board's policy and/or these regulations. Additionally, students may be subject to discipline, up to and including expulsion, as appropriate.

Special Guidelines

- a) District Registered Nurses may administer the following over the counter (OTC) medications as listed in Bethel Health Services protocol, as stated in guidelines issued by the Medical Director: Acetaminophen, Ibuprofen, Diphenhydramine, and Calcium Carbonate. All efforts will be made to contact parent/guardian prior to administering these medications.
- b) Staff designated at Willamette High School, Kalapuya High School, and Willamette High School camps may administer acetaminophen as stated in Bethel Health Services protocol with a signed parent/guardian permission form.
- c) The health assistant may administer a one-time dose of an approved OTC medication with parent/guardian and District Registered Nurse permission. A permission form will be sent home requesting that the parent/guardian supply the school with a written authorization and the OTC medication.

Receiving, Handling, Storage, and Disposal of Medications

- Medication administered by designated staff or self-administered by the student is to be brought in by the parent/guardian or responsible person over age 18 in its original container, accompanied by the permission form and written instructions, as required above.
- Medication in capsule or tablet form and categorized as a sedative, stimulant, anticonvulsant, narcotic analgesic or psychotropic medication will be counted by designated staff in the presence of another district employee upon receipt, documented in the student's Medication Administration Record (MAR) and routinely monitored during storage and administration. Discrepancies will be reported to the principal immediately and documented in the student's medication log. For such medication not in capsule or tablet form, standard measuring and monitoring procedures will apply.
- The school nurse will review the medication in order to teach the designated employee about adverse effects and to make note in the student's file.
- Medication is kept in locked storage, except Epinephrine, which is kept in an unlocked, labeled location.
- Medications for field trips or school outings will be provided to the leader of the field trip in the
 original vial and in a secure container with clear, written instructions for administration.
- Medication not picked up by the parent/guardian at the end of the school year, or within 5 days of the end of the medication period, whichever is earlier, will be disposed of per guidelines issued by Office of National Drug Control Policy by designated school staff in a non-recoverable fashion. All medication disposal must be done in the presence of another school employee, and noted on the MAR.

Addressing Concerns

In the event a student refuses medication, the parent/guardian-will be notified immediately. No attempt will be made by the designated, trained staff member to administer medication to a student who refuses district administered medication.

Any error in administration of medication will be reported to the parent/guardian and school nurse immediately and documented on the Accident/Incident form.

In the event of confusing/conflicting information, no medication will be administered until clarification occurs.

Documentation and Record Keeping

- a. A medication log will be maintained for each student administered medication by the district. The medication log will include, but not be limited to:
 - i. The name, dose and route of medication administered, date, time of administration and name of the person administering the medication;
 - ii. Student refusals of medication;
 - iii. Errors in administration of medication;
 - iv. Emergency and minor adverse reaction incidents;
 - v. Discrepancies in medication supply;
 - vi. Disposal of medication including date, quantity, manner in which the medication was destroyed and the signature of the staff involved.

- b. All records relating to administration of medicines, including permission slips and written instructions, will be maintained in a separate medical file apart from the student's education records file unless otherwise related to the student's educational placement and/or individualized education program. Records will be retained in accordance with applicable provisions of OAR 166-400-0010(17) and OAR 166-400-0060(29).
- c. Student medical files will be kept confidential. Access shall be limited to those designated school staff authorized to administer medications to students, the student, and his/her parents/guardians. Information may be shared with school staff with a legitimate educational interest in the student or others as may be authorized by the parent/guardian in writing.

A school administrator, school nurse, teacher or other district employee designated by the school administrator, are not liable in a criminal action or for civil damages as a result of a student's self-administration of medication, when that person in good faith assisted the student in self-administration of the medication, as per state law.

A school administrator, school nurse, teacher or other district employee are not liable in a criminal action or for civil damages, when in good faith administers autoinjectable epinephrine to a student or other individual with a severe allergy, who is unable to self administer the medication, as per state law.

A school district and the members of a school district board are not liable in a criminal action or for civil damages when a student or individual is unable to self-administer medication, when any person in good faith administers autoinjectable epinephrine to a student or individual, as per state law.

Students may, subject to the provisions of this administrative regulation, have prescription or nonprescription medication administered by designated-personnel, or may be permitted to administer prescription or nonprescription medication to themselves.

Definitions

- a. "Medication" means any drug, chemical compound, suspension or preparation in suitable form for use as a curative or remedial substance taken internally or externally but not injected except for premeasured doses of epinephrine, medication to treat adrenal insufficiency and glucagon to treat severe hypoglycemia. Medication includes any prescription for bronchodilators or autoinjectable epinephrine prescribed by a student's Oregon licensed health care professional for asthma or severe allergies.
- b. "Prescription medication" means any medication that under federal law requires a prescription by a prescriber.
- c. Nonprescription medication" means medication that under federal law does not require a prescription from a prescriber.
- d. "Adrenal crisis" means adrenal crisis as defined in Oregon Revised Statute (ORS) 433.800.
- e. "Adrenal insufficiency" means adrenal insufficiency as defined in ORS 433.800.
- f. "Notice of a diagnose is of adrenal insufficiency" means written notice to the district from a student or the parent or guardian of a student who has been diagnosed as adrenal insufficient with a copy of an order from the student's primary care provider that includes the student's diagnosis, description of symptoms indicating the student is in crisis, prescription for medication to treat adrenal insufficiency crisis and instructions for follow-up care after medication to treat adrenal insufficiency crisis has been administered.

- g. Prescriber¹" means a doctor of medicine or osteopathy, a physician assistant licensed to practice by the Board of Medical Examiners for the state of Oregon, an Oregon-licensed, advance practice registered nurse with prescriptive authority, a dentist licensed by the Board of Dentistry for the state of Oregon, an optometrist licensed by the Board of Optometry for the state of Oregon, a naturopathic physician licensed by the Board of Naturopathy for the state of Oregon or a pharmacist licensed by the Board of Pharmacy for the state of Oregon.
- h. "Qualified trainer" means a person who is familiar with the delivery of health services in a school setting and who is a registered nurse licensed by the Oregon State Board of Nursing, a doctor of medicine or osteopathy or a physician assistant licensed by the Board of Medical Examiners for the state of Oregon or a pharmacist licensed by the Board of Pharmacy for the state of Oregon.
- i. "Severe allergy" means a life-threatening hypersensitivity to a specific substance such as food, pollen, dust or insect sting.
- j. "Asthma" means a chronic inflammatory disorder of the airways that requires ongoing medical intervention.
- k. "Designated personnel" means the school personnel designated to administer medication pursuant to district policy and procedure.

Designated Staff/Training

- a. The principal will designate authorized personnel to administer prescription or nonprescription medication to a student while the student is in school, at a school-sponsored activity, under the supervision of school personnel, in a before-school or after-school care programs on school-owned property and in transit to or from school or a school-sponsored activity, as required by Oregon law. The principal will supervise and ensure building and activity practices and procedures are consistent with the requirements of law, rules and this administrative regulation.
- b. The principal will ensure the training required by Oregon law is provided to designated personnel. Training must be conducted by a qualified trainer. Training will be provided annually to designated personnel authorized to administer medication to students. The first year and every third year of training requires in-person instruction; during the intervening years, designated personnel may complete an online training that has been approved by the Oregon Department of Education (ODE) so long as a trainer is available within a reasonable amount of time following the training to answer questions and provide clarification.
- c. Training will provide an overview of applicable provisions of Oregon law, administrative rules, district policy and administrative regulations and include, but not be limited to, the following: safe storage, handling, monitoring medication supplies, disposing of medications, record keeping and reporting of medication administration and errors in administration, emergency medical response for life-threatening side effects, allergic reactions or adrenal insufficiency and student confidentiality. Materials as recommended and/or approved by the ODE will be used.

1/02, 11/07, 4/10, 7/15

¹A registered nurse who is employed by a public or private school, ESD or local public health authority to provide nursing services at a public or private school may accept an order from a physician licensed *to* practice medicine or osteopathy in another state or territory of the U.S. if the order is related to the care or treatment of a student who has been enrolled at the school for not more than 90 days.

- d. A copy of the district's policy and administrative regulation will be provided to all staff authorized to administer medication to students and others, as appropriate.
- e. A statement that the designated personnel has received the required training will be signed by the staff member and filed in the district office.
- 3. Administering Premeasured Doses of Epinephrine to a Student or Other Individual

A premeasured dose of epinephrine may be administered by trained, designated personnel to any student or other individual on school premises who the personnel believe, in good faith, is experiencing a severe allergic reaction, regardless of whether the student or individual has a prescription for epinephrine.

4. Administering of Medication to a Student Experiencing Symptoms of Adrenal Crisis

A student experiencing symptoms of adrenal crisis while the student is in school, at a school-sponsored activity, while under the supervision of school personnel, in a before-school or after-school care program on school-owned property and in transit to or from a school or a school-sponsored activity, may be treated by designated personnel and shall be subject to the following:

- a. Upon notice of a diagnosis of adrenal insufficiency, as defined in Oregon Administrative Rule (OAR) 581-021-0037, the building principal will designate one or more school personnel to be responsible for administering the medication to treat adrenal insufficiency;
- b. The designated personnel will successfully complete training to administer medication to treat a student who has adrenal insufficiency and is experiencing symptoms of adrenal crisis in accordance with the rules adopted by the Oregon Health Authority;
- c. The student or the student's parent or guardian must provide adequate supply of the student's prescribed medication to the district;
- d. The district will require the development of an individualized health care plan for the student that includes protocols for preventing exposures to possible triggers, and establishes if or when a student may self-carry prescription medication when the student has not been approved to self-administer medication;
- e. In the event that a student experiences symptoms of adrenal crisis and the designated personnel determines the medication to treat adrenal insufficiency should be administered, any available staff member will immediately call 911 and the student's parent or guardian.

5. Administering Medication to a Student

- a. A request to permit designated personnel to administer medication to a student may be approved by the district and is subject to the following:
 - (1) A written request for designated personnel to administer prescription medication to a student, if because of the prescribed frequency or-schedule, the medication must be given while the student is in school, at a school-sponsored activity, while under the supervision of school personnel and in transit to or from school or a school-sponsored activity, must be submitted to the school office and shall include:

- The written permission of the student's parent or guardian or the student if the student is allowed to seek medical care without parental consent pursuant to ORS 109.610, 109.640 or 109.675; and
- b) The written instruction from the prescriber for the administration of the medication to the student that includes:
 - (i) Name of the student;
 - (ii) Name of the medication;
 - (iii) Method of administration;
 - (iv) Dosage;
 - (v) Frequency of administration;
 - (vi) Other special instructions from the prescriber, if any; and
 - Signature of the prescriber. (vii)
- (c) The prescription label prepared by a pharmacist at the direction of the prescriber, will be considered to meet this requirement if it contains the information listed in (i)-(vi) above.
- (2)A written request for designated personnel to administer nonprescription medication to a student must be submitted to the school office and is subject to the following:
 - a) The nonprescription medication is necessary for the student to remain in school;
 - The nonprescription medication is provided in the original manufacturer's b) container by the parent or guardian of the student;

The written instruction from the student's parent or guardian for the administration of the nonprescription medication includes:

- (i) Name of the student;
- (ii) Name of the medication;
- (iii) Method of administration;
- (iv) Dosage;
- Frequency of administration; (v)
- (vi) Other special instructions, if any; and
- Signature of the student's parent or guardian. (vii)

If the written instruction is not consistent with the manufacturer's guidelines for the nonprescription medication, the written instruction must also include a written order allowing the inconsistent administration signed by a prescriber.

- If the nonprescription medication is not approved by the Food and Drug Administration (FDA), a written order from the student's prescriber is required and will include:
 - (i) Name of the student;
 - (ii) Name of the medication;

- (iii) Dosage;
- (iv) Method of administration;
- (v) Frequency of administration;
- (vi) A statement that the medication must be administered while the student is in school;
- (vii) Other special instructions, if any; and
- (viii) Signature of the prescriber.
- b. An individualized health care and allergy plan will be developed for a student with a known life-threatening allergy. It will include protocols for preventing exposures to allergens and procedures for responding to life-threatening allergic reactions while the student is in school, at a school-sponsored activity, while under the supervision of school personnel, in a before-school or after-school care program on school-owned property and in transit to or from the school or a school-sponsored activity. It will also include a determination on if or when the student may self-carry prescription medication if the student has not been approved to self-administer medication;
 - c. It is the student's parent or guardian's, or the student's (if the student is allowed to seek medical care without parental consent), responsibility to ensure that an adequate amount of medication is on hand at the school for the duration of the student's need to take medication;
 - d. It is the student's parent or guardian's, or the student's (if the student is allowed to seek medical care without parental consent), responsibility to ensure that the school is informed in writing of any changes in medication instructions;
 - e. In the event a student refuses medication, the parent or guardian will be notified immediately, except where a student is allowed to seek medical care without parental consent. No attempt will be made to administer medication to a student who refuses a medication;
 - f. Any error in administration of a medication will be reported to the parent or guardian immediately (except where a student is allowed to seek medical care without parental consent), and documentation will be made on the district's Accident/Incident Report form. Errors include, but are not limited to, administering medication to the wrong student, administering the wrong medication, dose, frequency of administration or method of administration;
 - g. Medication shall not be administered until the necessary permission form and written instructions have been submitted as required by the district.

- 6. Administration of Medication by a Student to Themselves
 - a. A student, including a student in grade K through 12 with asthma or severe allergies, may be permitted to administer medication to themselves without assistance from designated personnel and is subject to the following:
 - (1) A student must demonstrate the ability, developmentally and behaviorally, to self-administer prescription medication and must have:
 - A permission form from a parent or guardian (except when the student is allowed to seek medical care without parental consent pursuant to ORS 109.610, 109.640 or 109.675) and other documentation requested by the District must be submitted for self-medication of all prescription medications;
 - b) If the student has asthma, diabetes and/or a severe allergy, a medication that is prescribed by a prescriber and a written treatment plan developed by a prescriber or other Oregon licensed health care professional for managing of the student's asthma, diabetes and/or severe allergy, and directs use by the student while the student is in school, at a school-sponsored activity, while under the supervision of school personnel, in a before-school or after-school care program on school-owned property and in transit to or from school or a school-sponsored activity. The prescriber will include acknowledgment that the student has been instructed in the correct and responsible use of the prescribed medication;
 - c) The permission to self-administer the medication from a building administrator and a prescriber or registered nurse practicing in a school setting.
 - (2) A student must demonstrate the ability, developmentally and behaviorally, to self-administer nonprescription medication and must have:
 - The written permission of the student's parent or guardian (except when the student is allowed to seek medical care without parental consent pursuant to ORS 109.610, 109.640 or 109.675);
 - b) The student's name affixed to the manufacturer's original container; and
 - The permission to self-administer medication from a building administrator.

- (3) A student must demonstrate the ability, developmentally and behaviorally, to self-administer nonprescription medication that is not approved by the FDA and must have:
 - a) The written permission of the student's parent or guardian (except when the student is allowed to seek medical care without parental consent pursuant to ORS 109.610, 109.640 or 109.675):
 - b) A written order from the student's prescriber that includes:
 - (i) Name of the student;
 - (ii) Name of the medication;
 - (iii) Dosage;
 - (iv) Method of administration;
 - (v) Frequency of administration;
 - (vi) A statement that the medication must be administered while the student is in school;
 - (vii) Other special instructions, if any; and
 - (viii) Signature of the prescriber.
 - b. The student may have in his/her possession only the amount of medication needed for that school day, except for manufacturer's packaging that contains multiple dosage, the student may carry one package, such as, but not limited to, autoinjectable epinephrine or bronchodilators/inhalers;
 - c. Sharing and/or borrowing of any medication with another student is strictly prohibited;
 - d. For a student who has been prescribed bronchodilators or epinephrine, the designated personnel will request that the parent or guardian provide backup medication for emergency use by that student. Backup medication, if provided will be kept at the student's school in a location to which the student has immediate access in the event the student has an asthma and/or severe allergy emergency;
 - e. Upon written request from a parent or guardian, and with a prescriber's written statement that the lack of immediate access to a backup autoinjectable epinephrine may be life threatening to a student, and the location the school stores backup medication is not located in the student's classroom, a process shall be established to allow the backup autoinjectable epinephrine to be kept in a reasonably secure location in the student's classroom;
 - f. A student shall not administer medication to themself until the necessary permission form and written instructions have been submitted as required by the district;
 - g. Permission for a student to administer medication to themself may be revoked if the student violates the Board policy and/or this administrative regulation;
 - h. A student may be subject to discipline, up to and including expulsion, as appropriate;
 - i. A student permitted to administer medication to themself may be monitored by designated personnel to monitor the student's response to the medication.
- 7. Handling, Monitoring, and Safe Storage of Medication Supplies for Administering Medication to Students

- a. Medication administered by designated personnel to a student or self-administered by a student, must be delivered to the school in its original container, accompanied by the permission form and written instructions, as required above.
- b. Medication in capsule or tablet form and categorized as a sedative, stimulant, anticonvulsant, narcotic analgesic or psychotropic medication will be counted by designated personnel in the presence of another district employee upon receipt, documented in the student's medication log and routinely monitored during storage and administration. Discrepancies will be reported to the principal immediately and documented in the student's medication log. For such medication not in capsule or tablet form, standard measuring and monitoring procedures will apply.
- c. Designated personnel will follow the written instructions of the prescriber and the student or the student's parent or guardian, and training guidelines as may be recommended by the ODE for administering all forms of prescription and/or nonprescription medications.
- d. Medication will be secured as follows:
 - 1) Non-refrigerated medications will be stored in a locked cabinet, drawer or box;
 - Medications requiring refrigeration will be stored in a locked box in a refrigerator or in a separate refrigerator used solely for the storage of medication;
 - Access to medication storage keys will be limited to the principal and designated personnel.
- e. Designated personnel will be responsible for monitoring all medication supplies and for ensuring medication is secure at all times, not left unattended after administering and that the medication container is properly sealed and returned to storage.
- f. In the event medication is running low or an inadequate dosage is on hand to administer the medication, the designated personnel will notify the student's parent or guardian or the student (in situations involving ORS 109.610, 109.640 and 109.675) immediately.

Emergency Response

- a. Designated personnel will notify 911 or other appropriate emergency medical response systems and administer first aid, as necessary, in the event of life-threatening side effects that result from district-administered medication or from student self-medication or allergic reactions. The parent or guardian, school nurse and principal will be notified immediately.
- b. Minor adverse reactions that result from district-administered medication or from student self-medication will be reported to the parent or guardian immediately (except when the student is allowed to seek medical care without parental consent pursuant to ORS 109.610, 109.640 or 109.675).
- c. Any available district staff will immediately call 911 and the student's parent or guardian if the designated personnel believes the student is experiencing symptoms of adrenal crisis and plans to administer medication.

9. Special Guidelines

a) District Registered Nurses may administer the following over-the-counter (OTC) medications as listed in Bethel Health Services protocol, as stated in guidelines issued by the Medical Director: Acetaminophen, Ibuprofen, Diphenhydramine, and Calcium Carbonate. All efforts will be made to contact parent/guardian prior to administering these medications. b) Staff designated Designated staff at Willamette High School, and Kalapuya High School, and Willamette High School camps may administer acetaminophen, as stated in Bethel Health Services protocol, with a signed parent/guardian permission form. c) The health assistant may administer a one-time dose of an approved OTC medication with parent/guardian and District Registered Nurse permission. A permission form will be sent home requesting that the parent/guardian supply the school with a written authorization and the OTC medication.

10. Disposal of Medications

- a. Medication not picked up by the student's parent or guardian (or the student when allowed pursuant to ORS 109.610, 109.640 and 109.675) at the end of the school year or within five school days of the end of the medication period, whichever is earlier, will be disposed of by designated personnel in a non-recoverable fashion as follows:
 - (1) Medication will be removed from its original container and personal information will be destroyed;
 - (2) Solid medications will be crushed, mixed or dissolved in water, liquid medications will be mixed or dissolved in water; and
 - (3) Mixed with an undesirable substance, e.g., coffee grounds, kitty litter, flour; and
 - (4) Placed in impermeable non-descriptive containers, e.g., empty cans or sealable bags, and placed in the trash.

Prescriptions will be flushed down the toilet **only** if the accompanying patient information specifically instructs it is safe to do so.

Other medication will be disposed of in accordance with established training procedures including sharps and glass.

b. All prescription medication will be disposed of by designated personnel in the presence of another school employee and documented as described in Section 11, below.

11. Transcribing, Recording and Record Keeping

- a. A medication log will be maintained for each student administered medication by the district. The medication log will include, but not be limited to:
 - (1) The name of the student, name of medication, dosage, method of administration, date, and time of administration, frequency of administration and the name of the person administering the medication;
 - (2) Student refusals of medication;
 - (3) Errors in administration of medication;
 - (4) Incidents of emergency and minor adverse reaction by a student to medication;
 - (5) Discrepancies in medication supply;
 - (6) Disposal of medication including date, quantity, manner in which the medication was destroyed and the signature of the staff involved.
- b. All records relating to administration of medications, including permissions and written instructions, will be maintained in a separate medical file apart from the student's education records file unless otherwise related to the student's educational placement and/or individualized education program. Records will be retained in accordance with applicable provisions of OAR 166-400-0010(17) and OAR 166-400-0060(29).
- c. Student health information will be kept confidential. Access shall be limited to those designated personnel authorized to administer medication to students, the student and his/her parents or guardian. Information may be shared with other staff with a legitimate educational interest in the student or others as may be authorized by the parent or guardian in writing or others as allowed under state and federal law.

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Subject: <u>Injury/Illness Repo</u>	rts
Policy Number: EBBB	Effective Date: 1/2014
Date of Original Policy and Re-	visions: N/A
Cancels Policy No.: N/A	Dated: N/A
Date of Next Review: 1/17	

POLICY

All injuries/illnesses sustained by an employee while in the actual performance of the duty of the employee occurring on district premises, in district vehicles, at a district-sponsored activity or involving staff members who may be elsewhere on district business will be reported immediately to a supervisor. All accidents involving students, visiting public or district property will be reported immediately to a supervisor.

A written report will be submitted within 24 hours to the safety officer. Reports will cover property damage as well as personal injury.

In the event of a work-related¹ illness or injury to an employee resulting in overnight hospitalization for medical treatment² other than first aid, the safety officer shall inform the Oregon Occupational Safety and Health Division (OR-OSHA). A This report will be made within 24 hours after notification to the district of an illness or injury. Fatalities or catastrophes³ shall be reported to OSHA within eight hours.

ALL injuries/illnesses sustained by an employee, while in the actual performance of the duty of the employee or by a student or visiting public will be promptly investigated. As a result of the investigation any corrective measures needed will be acted upon.

Monthly records will be maintained. An analysis of the data and trends will be made at least annually.

The Superintendent or designee will receive district safety officer will maintain records and reports on serious injuries/illnesses, including accidents involving district property or employees, students or visiting publics, and periodic statistical reports on the number and types of injuries/illnesses occurring in the district, as well as on the measures being taken to prevent such injuries/illnesses in the future.

The records will include monthly reporting information and an analysis of the data and trends will be conducted at least annually. Such reports will be submitted to the superintendent for review annually.

END OF POLICY

Legal Reference(s): Legal Reference(s):

¹An injury or illness is work related if an event or exposure in the work environment caused or contributed to the condition or significantly aggravated a preexisting condition.

²Medical treatment includes managing or caring for a patient for the purpose of combatting disease or disorder. The following are not considered medical treatment: visits to a doctor or health-care professional solely for observation or counseling; diagnostic procedures including administering prescription medications used solely for diagnostic purposes: and any procedure that can be labeled first aid.

purposes; and any procedure that can be labeled first aid.

³A catastrophe is an accident in which two or more employees are fatally injured, or three or more employees are admitted to a hospital or an equivalent medical facility.

OAR 437-001-0015 OAR 437-001-0700 OAR 437-001-0760 OAR 581-022-1420

HB 3045 (2013)

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February 26, 2018

RESOLUTION NO. 17-18: 38

RESOLUTION: CONSENT AGENDA/PERSONNEL ACTION

The Board of Directors, School District No. 52, Lane County, approves personnel action involving licensed employees and extra duty contracts at each regularly scheduled School Board meeting. If the Board of Directors would like to discuss any of these recommendations in executive session, the employee should be identified by the number preceding the name and it will be withdrawn pending further instruction from the Board. Remie Calalang is available for questions.

RECOMMENDATION:

It is recommended that the School Board approve the Consent Agenda as reflected in this resolution and any addendum presented along with this resolution.

#	Name	Туре	Description
1.	Hovey, Ryan	Resignation	Accept Resignation effective February 16, 2018; Position Held: 8 th Grade Math Teacher @ Shasta; 4 months at Bethel.
2.	Wade, Ben	Resignation	Accept Resignation effective at the end of the 2017-18 school year; Position Held: 9 th – 12 th Grade Math Teacher @ Willamette; 5 years at Bethel.

Recommended by: Remie Calalang, Human Resources Director

ATTEST		
	Clerk – Chris Parra	
MOVED BY		_
SECONDED BY		_
DATE		-
RESOLUTION:	Passed / Failed	

BOARD MEMBERS	AYE	NAY	ABSTAIN	ABSENT
Rich Cunningham				
Debi Farr				
Dawnja Johnson				
Paul Jorgensen				
Alan Laisure				
Greg Nelson				
Ginger Poage				

Chair - Dawnja Johnson

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February 26, 2018

RESOLUTION NO. 17-18: 37

BE IT RESOLVED, That the Board of Directors, School District No. 52, Lane County, approves in its calculation of instructional time required under OAR 581-022-1620 the inclusion of:

- up to 60 hours of recess for grades K-3,
- up to 30 hours of professional development,
- up to 30 hours for parent teacher conferences.

ATTEST										
Clerk - Chris Parra	Chair	Chair – Dawnja Johnson								
MOVED BY	BOARD MEMBERS	AYE	NAY	ABSTAIN	ABSENT					
	Debi Farr									
SECONDED BY	Dawnja Johnson									
	Paul Jorgensen									
DATE	Alan Laisure									
	Greg Nelson									
RESOLUTION: Passed / Failed	Ginger Poage									
	Dish Consideration									

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February 26, 2018

RESOLUTION NO. 17-18: 39

BE IT RESOLVED, That the Board of Directors, School District No. 52, Lane County, hereby open the following grade-level bands to out-of-district students in 2018-2019 under the Open Enrollment provisions of House Bill 3681 and Bethel Board Policy JECB.

The following grade-level bands are open to out-of-district students in 2018-2019:

Grade-Level Band	Schools open to new out-of-district students for 2018-2019	Grade-level bands open to new out- of-district students for 2018-2019
Elementary Level	Clear Lake Elementary School	At kindergarten through 5 th grade
	Danebo Elementary School	Bethel will open enrollment to new
(K-5 th Grade)	Fairfield Elementary School	out-of-district students through this
	Irving Elementary School	process to a maximum of 229
	Malabon Elementary School	students.
	Meadow View School	
	Prairie Mountain School	
Middle Level	Cascade Middle School	At 6 th through 8 th grade Bethel will
	Shasta Middle School	open enrollment to new out-of-
(6 th -8 th Grade)	Meadow View School	district students through this
	Prairie Mountain School	process to a maximum of 116
		students.
High School Level	Willamette High School	At 9 th through 11 th grades Bethel will
		open enrollment to new out-of-
(9 th -11 th Grade)		district students through this
		process to a maximum of 70
		students.

This resolution allows for the enrollment of additional students at nearly every grade level and all but one school in Bethel School District. Actual enrollment numbers at each grade level and school will vary based on the latest projected enrollment and space available on April 1, 2018.

District and school acceptance of individual students will follow Policy JECB.

ATTEST									
Clerk – Chris Parra	Chair – Dawnja Johnson								
MOVED BY	BOARD MEMBERS	AYE	NAY	ABSTAIN	ABSENT				
	Debi Farr								
SECONDED BY	Dawnja Johnson								
	Paul Jorgensen								
DATE	Alan Laisure								
	Greg Nelson								
RESOLUTION: Passed / Failed	Ginger Poage								
	Rich Cunningham								