

ACADEMIC HONESTY

The School Board believes that personal integrity is basic to all solid achievement. Students will reach their full potential only by being honest with themselves and with others.

The Board expects students to respect the educational purpose underlying all school activities. All students need to prove to themselves that they can do successful work as a result of their own efforts. The Board expects that students will not cheat, lie or plagiarize.

Each school shall provide an environment that encourages honesty. Students must know that their teachers will not ignore or condone cheating and that anyone discovered cheating will be penalized.

(cf. 5144 - Discipline)

ACADEMIC INTEGRITY

Yakutat School District is committed to academic integrity and has set forth the following policy to insure that students are held to high standards of academic ethics. Adherence to a strict code of ethical behavior is the responsibility of every student. The following constitutes academic fraud and violates the school's academic integrity policy.

Submitting work which is not original

1. Students may not obtain work, assignments, projects or writing from others (parents/guardians, students, tutors, etc.) or from internet or print sources. Failing to credit original sources for words or ideas is **plagiarism**. Students may not borrow phrases, sentences or paragraphs without quotation marks and appropriate citation. Casual paraphrasing does not make the work original. Similarly students may not claim ideas taken from other writers as their own.

Violating the integrity of examination/assigned work

2. Students may not obtain or provide answers from any source during a test/quiz. Nor may students copy one another's assigned work. Sharing information with anyone who has not taken the test/quiz also violates policy.

Falsification

3. Students may not fabricate data, sources or falsify results in their work. Students may not lie or misrepresent facts to gain an academic advantage. For instance, students may not alter documents/grades, lie to avoid taking a test, lie to avoid turning in an assignment, or lie to avoid accepting a consequence.

Consequences for not adhering to Academic Integrity Policy

1. Parents and/or guardians will be contacted.
2. School administration will be notified.
3. Reduction of citizenship grade.
4. No credit given for the assignment, test or quiz. Students are not allowed to make up the assignment, test or quiz.

Students who have directly witnessed or have evidence of academic dishonesty have an ethical responsibility to immediately report this discretion to a teacher or administrator.

DRESS AND GROOMING

The School Board believes that appropriate dress and grooming contribute to a productive learning environment. The Board expects students to give proper attention to personal cleanliness and to wear clothes that are suitable for the school activities in which they participate. Students have the right to make individual choices from a wide range of clothing and grooming styles, but they must not present a health or safety hazard or a distraction which would interfere with the educational process.

(cf. 4119.22 - Dress and Grooming (staff))
(cf. 5145.2 - Freedom of Speech/Expression)

Students and parents/guardians shall be informed about the school dress code at the beginning of the year and when revised. A student who violates the dress code shall be subject to appropriate disciplinary action.

(cf. 5144 - Discipline)

Legal Reference:
Breese v. Smith, 501 P.2d 159, (Alaska 1979)

GIFTS TO SCHOOL PERSONNEL

The School Board believes that feelings of appreciation can be expressed in many ways. The Board discourages students and parents/guardians from giving gifts to staff members, and instead encourages them to write personal notes of appreciation. District staff accepting gifts from students or parents/guardians should be sensitive to the feelings of other students and use discretion if gifts are opened in front of others.

Legal Reference:

ALASKA STATUTES

11.56.110 Bribery

11.56.110 Receiving a bribe

11.56.120 Receiving unlawful gratuities

11.56.130 Definition

POSITIVE SCHOOL CLIMATE

Note: This optional policy endorses positive steps to create a positive school climate, which is linked to student achievement. All parts of this sample may be modified as desired.

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, 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 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 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

YAKUTAT SCHOOL DISTRICT
Adopted: July 2, 1997
Revised: April 2, 2007
Revised: May 7, 2012

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

The 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 building administrator.

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 a building administrator 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 administrator is required in situations where permission can be obtained.

Conditions of Use

Students may possess and use portable electronic devices including, but not limited to, cell phones, smartphones, music players, tablets, laptops, etc., subject to limitations of this and other policies of the district.

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

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 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.

Note: The following optional paragraph reflects the guidelines used by the Anchorage School District to specify permitted uses based on grade level. It may be revised or deleted as appropriate.

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. High school students may use cellular phones and other portable electronic devices before and after school and during the student's lunch period. Elementary and middle school students (grades K-8) may use such devices only before and after school. Additionally, 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 students' 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.

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

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)

Students

BP 5138(d)

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

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)

YAKUTAT SCHOOL DISTRICT
Adopted: June 29, 2010
Revised: May 7, 2012

HEALTH CARE AND EMERGENCIES

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 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 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.

HEALTH CARE AND EMERGENCIES (continued)

School personnel may provide a community resource list that identifies community medical and mental health resources. The Superintendent/Chief School Administrator 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

YAKUTAT SCHOOL DISTRICT

Adopted: July 2, 1997

Revised: April 17, 2006

Revised: April 2, 2007

HEALTH CARE AND EMERGENCIES

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/Site Administrator is responsible for ensuring that referrals are made in compliance with the above requirements and BP 5141.

**YAKUTAT SCHOOL DISTRICT
Adopted: April 2, 2007**

Administering Medication

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 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 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. 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.

Students

BP 5141.21(b)

Administering Medication

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

YAKUTAT SCHOOL DISTRICT

Adopted: July 2, 1997

Revised: May 16, 2005

Revised: April 17, 2006

Students

AR 5141.21(a)

Administering Medication

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.

Note: The following optional paragraph may be used to prevent the possibility of a student switching the medication with a controlled substance.
--

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'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

Parents/guardians of students who may require emergency anaphylactic injections shall provide explicit written permission for authorized staff to administer such injections.

Each year, school employees designated by the principal shall receive training in administering anaphylactic injections. Qualified medical personnel shall provide this training.

Administering Medication (continued)

3. The principal or designee shall schedule inservice meetings to:
 - a. Familiarize authorized staff with the prescribed medications and their location.
 - b. Ensure that authorized staff are competent to administer anaphylactic injections.
 - c. Train all school personnel to recognize the symptoms of anaphylactic reactions.

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

4. The principal or designee shall prepare a list naming the students who may need emergency anaphylactic injections. This list shall be 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 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.

Students

AR 5141.21(c)

Administering Medication (continued)

- 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.
 - 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.
2. All of the information identified in number 1 above must be updated annually.
 3. 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.
 4. The principal 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.
 5. All inhalers and injection kits shall be clearly labeled with the student's name, medicine name, and expiration date.
 6. The student shall report each use of the asthma inhaler or anaphylactic injection to [his or her teacher/principal/school health office] so that a record of administration may be kept.
 7. 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.

YAKUTAT SCHOOL DISTRICT

Adopted: July 2, 1997

Revised: May 16, 2005

Revised: April 17, 2006

ALLERGY/ANAPHYLAXIS ACTION PLAN

Student Name _____ D.O.B. _____

Teacher _____ School Nurse _____ Phone Number _____

Health Care Provider _____ Preferred Hospital _____

History of Asthma No Yes – Higher risk for severe reaction**ALLERGY:** (check appropriate) **To be completed by Health Care Provider****Foods (list):****Medications (list):****Latex: Circle: Type I (anaphylaxis) Type IV (contact dermatitis)****Stinging Insects (list):****RECOGNITION AND TREATMENT**

Chart to be completed by Health Care Provider ONLY Give CHECKED Medication *If food ingested or contact w/ allergen occurs:* EpiPen Antihistamine No symptoms noted Observe for other symptoms Mouth Itching, tingling, or swelling of lips, tongue, mouth Skin Hives, itchy rash, swelling of the face or extremities Gut+Nausea, abdominal cramps, vomiting, diarrhea Throat+Tightening of throat, hoarseness, hacking cough Lung+Shortness of breath, repetitive coughing, wheezing Heart+Thready pulse, low BP, fainting, pale, blueness Neuro+Disorientation, dizziness, loss of conscience If reaction is progressive (several of the above areas affected), GIVE: ***The severity of symptoms can quickly change.***

+Potentially life-threatening**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 _____ Phone: _____ 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.

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 nurse, 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 Other:

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

Allergy/Anaphylaxis Action Plan *(continued)*

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

Parent/Guardian AUTHORIZATIONS

STUDENTS

BP 5141.22(a)

INFECTIOUS DISEASES

The 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.

INFECTIOUS DISEASES (continued)

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

YAKUTAT SCHOOL DISTRICT
Adopted: July 2, 1997
Revised: May 16, 2005

INFECTIOUS DISEASES

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, <i>Issues Related to HIV Transmission in Schools, Child Care, Medical Settings, the Home, and Community</i> .
--

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.

Students

AR 5141.22(b)

INFECTIOUS DISEASES (continued)

- 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, 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.

INFECTIOUS DISEASES (continued)

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

YAKUTAT SCHOOL DISTRICT

Adopted: July 2, 1997

Revised: May 16, 2005

INFECTIOUS DISEASE PREVENTION

The 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)

INFECTIOUS DISEASE PREVENTION

Note: The following sample regulation may be revised or deleted as needed.
--

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

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.

**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 leakproof plastic bags for proper disposal or washing.

Revised 12/04

YAKUTAT SCHOOL DISTRICT
Adopted: July 2, 1997
Revised: May 16, 2005

Students

BP 5141.3

HEALTH EXAMINATIONS

Note: Pursuant to AS 14.30.020 and AS 14.30.127 districts must provide for or require each child to have a physical examination and a vision and hearing screening examination, upon entry into school or as soon as practical and at regular intervals as determined by the school board.

The School Board recognizes the importance of periodic health examinations conducted according to state health regulations. To determine the health status of students, facilitate the removal of handicaps to learning, and determine whether special adaptations of the school program may be necessary, the Board shall require that physical examinations be conducted, including tests for vision and hearing upon entry into school or as soon as practical.

All personnel employed to examine students shall exercise proper care of each student being examined and shall ensure that the examination results are kept confidential.

Note: If a school district will be using federal money to perform exams or screenings on students, the district must annually notify parents of the exam or screening, except for hearing, vision, or scoliosis screenings. The following language implements federal law.

The district will annually notify parents of physical exams or screenings of students, except for routine vision, hearing, or scoliosis screenings.

(cf. 5112.2 - Exclusions from Attendance)
(cf. 5141.22 - Infectious Diseases)

Legal Reference:

ALASKA STATUTES

14.30.065 *Supervision*

14.30.070 *Physical examination required*

14.30.120 *Certificate of physical examination*

14.30.127 *Vision and hearing screening examinations*

ALASKA ADMINISTRATIVE CODE

4 AAC 06.055 *Immunizations required*

NO CHILD LEFT BEHIND ACT, Title II, § 1061, P.L. 107-110 (2002)

UNITED STATES CODE

42 U.S.C. §§ 12101 *et seq.* (1997)

20 U.S.C. 1232g § 1400 6301 *et seq.* (1997)

29 U.S.C. § 794(a) (1988)

28 C.F.R. 35

34 C.F.R. *pt.* 99, 104, 200, 300 *et seq.* (1999)

YAKUTAT SCHOOL DISTRICT

Adopted: July 2, 1997

Revised: May 16, 2005

IMMUNIZATIONS

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*

YAKUTAT SCHOOL DISTRICT
Adopted: July 2, 1997
Revised: May 7, 2001
Revised: September 21, 2009

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.

Note: Many school employees may encounter child abuse and neglect. The following optional language expands the number of school employees offered training in child abuse recognition and reporting. It may be revised or deleted as desired.

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

YAKUTAT SCHOOL DISTRICT

Adopted: July 2, 1997

Revised: June 2, 2014

Students

CHILD ABUSE AND NEGLECT

AR 5141.4(a)

Note: The following sample regulation may be revised as needed to reflect district circumstances.

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 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.

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/site administrator 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/site administrator shall make provisions to protect and to maintain as confidential, the identity of the employee or employees making the report.

YAKUTAT SCHOOL DISTRICT
Adopted: July 2, 1997
Revised: June 2, 2014

CHILD ABUSE PREVENTION

Every child has the right to live free of physical and emotional abuse, including neglect and sexual assault. The 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.

(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.

(cf. 1020 - Youth Services)

(cf. 6142.1 - Family Life/Sex Education)

Legal Reference:

ALASKA STATUTES

14.30.360 Curriculum (Health and Safety Education)

Students

SUICIDE PREVENTION

BP 5141.52(a)

Note: This optional policy may be revised or deleted as desired **and should not be adopted unless the district fully implements it as adopted.** In 1985, the Federal Ninth Circuit Court of Appeals (Kelson vs. The City of Springfield, Oregon 767 F. 2d 651) ruled that the parents/guardians of a youth who committed suicide may sue a school because the death allegedly resulted from inadequate training under a district's suicide prevention policy. In 2012, the Alaska Legislature passed the Jason Flatt Act requiring suicide awareness and prevention training for specific school personnel. The Act, which is uncodified and is found at Enrolled SB 137 (2012), also provides civil immunity for districts and employees from a death or personal injury that results from an act or omission in providing or obtaining that training.

The School Board finds it important that the tragic situation of adolescent suicide be openly addressed and that staff, students and parents/guardians be made aware of warning signs and procedures by which they may help suicidal students at this especially vulnerable age.

The Board recognizes that all suicide threats must be taken seriously. The Superintendent or designee shall provide appropriate staff members with procedures for intervening in low-risk and in high-risk crisis situations. These procedures shall include guidelines by which staff members may assess the seriousness of a student's risk for suicide.

The Board believes that school staff, students and parents/guardians all can contribute significantly towards the prevention of adolescent suicide. The district shall make available suicide prevention training for each of these segments of the school community.

Parent/Guardian Awareness

Note: The following parent/guardian involvement paragraph will affect school principals' responsibilities.

The Board believes all parents/guardians should be aware of the severity of the youth suicide problem. Before suicide prevention is taught in classrooms, parents/guardians shall be advised and invited to review the curriculum goals and the district suicide prevention policy. Parent/guardian information may be provided, and meetings may be held, to help parents/guardians recognize warning signs of suicide, learn basic steps for helping suicidal youths, and identify community resources that can help teenagers in crisis.

Students

SUICIDE PREVENTION (continued)

BP 5141.52(b)

Staff Awareness & Training

Note: The Jason Flatt Act requires districts to provide annual training on youth suicide awareness and prevention to the following staff: each teacher, administrator, counselor, and specialist who is employed by the district to provide services to students in grades 7-12. The training must be approved by the Commissioner of Education and provided to teachers at no cost. Training must be not less than two hours in length and may be offered through videoconferencing or an individual program of study.

The Board strongly encourages teachers to help students of all ages develop both a positive self-image and a realistic attitude towards potential accomplishments.

In order that district staff may learn suicide prevention strategies, to recognize the warning signs of suicidal crisis, to understand how to help suicidal youths, and to identify helpful community resources, the Superintendent or designee shall arrange annual suicide awareness and prevention training as required by law. Additional certificated and classified staff may also be included. The district suicide prevention policy and procedures shall be thoroughly reviewed at this time. Staff shall be expected to learn to identify potentially suicidal students, to assess the degree of risk, to take preventive precautions and to report suicide threats to the appropriate authorities.

Curriculum

The Board finds it appropriate that suicide prevention instruction be incorporated into the ninth and tenth grade curriculum. This instruction shall help students:

Understand how feelings of depression and despair can lead to suicide.

Identify alternatives to suicide and develop new coping skills.

Recognize the warning signs of suicidal intentions in their friends.

Learn to listen, be honest, share feelings and get help when communicating with friends who show signs of suicidal intent.

Identify community resources where teenagers can get crisis intervention help.

Students

SUICIDE PREVENTION (continued)

BP 5141.52(c)

Peer Counseling

The Board endorses the use of peer counselors who can provide an effective support system for students who are uncomfortable communicating with adults. Peer counselors shall be expected to have completed the suicide prevention curriculum and demonstrated that they are able to identify the warning signs of suicidal behavior, make contact rapidly, and get a suicidal student to adult help.

Legal Reference:

ALASKA STATUTES

Enrolled SB 137 (2012) (uncodified), Requiring suicide awareness and prevention training for certain school personnel

Revised 3/2013

YAKUTAT SCHOOL DISTRICT

Adopted: June 3, 2013

SAFETY

The School Board places a high priority on safety and on the prevention of student injury. The district shall make reasonable effort to ensure the safety and proper conduct of students from the time they come under school supervision until they leave school supervision, whether on school premises or not. The Superintendent or designee shall establish procedures as necessary to protect students from dangerous situations.

(cf. 3514 - Environmental Safety)

(cf. 3515 - School Safety and Security)

(cf. 3515.2 - Intruders on Campus)

(cf. 5131.1 - Bus Conduct)

(cf. 5141 - Health Care and Emergencies)

(cf. 5144 - Discipline)

(cf. 6114 - Emergencies and Disaster Preparedness Plan)

Personnel responsible for releasing a student from school custody shall exercise extreme diligence to prevent such release to any unauthorized or unidentified person.

Playgrounds

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

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

Students

AR 5142(a)

SAFETY

Supervision

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

The principal shall inform parents/guardians of the hours before or after school that students may be on campus.

Safety rules for the use of facilities and equipment shall include as appropriate:

1. Rules on acceptable playground behavior and on the proper use of play apparatus in elementary schools.
2. Rules relating to gymnasium and field areas in high schools.
3. Safety rules clearly posted in science classes.
4. Shop class rules, including the requirement that power equipment never be used without the teacher's presence in the shop. Students must pass safety tests at mastery level before using such equipment, and test results must be kept on record.

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

The Superintendent or designee shall:

1. Clearly identify supervision zones on the playground and require that supervisors remain outside at a location from which they can observe their entire zone of supervision.
2. Require that all individuals supervising students remain alert in spotting dangerous conditions and report any such conditions to the Superintendent or designee promptly and in writing.

SAFETY (continued)

3. Establish emergency procedures that ensure swift response to accidents, fighting, and situations that could become dangerous, such as overcrowding or unusual gatherings of students.

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

Release of Student to Adult

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

1. The adult is the student's parent/legal guardian.
2. The adult has appropriate identification and the verified authorization of the student's parent/legal guardian.
3. The adult is a properly authorized law officer acting in accordance with law.
4. The adult is taking the student to emergency medical care.

(cf. 5021 - Noncustodial Parents)

(cf. 5141.4 - Child Abuse and Neglect (Reporting Procedures))

(cf. 5145.11 - Questioning and Apprehension)

Laboratory Safety

The principal of each school offering laboratory work to students shall designate a trained certificated employee to regularly review and update the school's procedures for laboratory safety.

SAFETY (continued)

Playground Design, Equipment and Maintenance

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

All new playgrounds should be designed for ease of supervision and should have:

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

The age, size and ability of the students who will use playground equipment shall determine the choice of equipment, the height of platforms and slides, and the diameter of climbing bars.

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

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

1. Concrete footings shall be kept from six to twelve inches below finished grade.
2. Appropriate cushioning material shall be installed under the equipment before it is used.
 - a. Except for tetherball poles and basketball standards, playground equipment shall not be installed over blacktop.

SAFETY (continued)

- b. Cushioning material shall be placed in all areas where a student might fall when using the equipment.
 - c. Cushioning material shall be maintained at the depth recommended by the manufacturer, always at least eight inches.
 - d. Cushioning material shall be resupplied on a regular basis to ensure adequate depth at all times, including vacation breaks.
3. The equipment and its cushioning border shall be set back at least eight feet from other equipment. Swings shall be set back at least two times the crossbar height, both front and back other than equipment existing at time of adoption.

Maintenance staff shall:

1. Regularly clean cushioning material from areas surrounding the cushioned area so as to minimize slipping.
2. Regularly inspect playground equipment and fences to ensure that all parts are in good condition.
 - a. Check wooden structures for holes, cracks, splinters, and possible rot at ground level.
 - b. Look for protruding nails or sharp edges and repair as needed.

Note: By October 14, 2014, school districts must prohibit the restraint or seclusion of students except in situations where student behavior poses an imminent danger of physical injury. AS 14.33.125. Districts must also provide periodic training in an approved crisis intervention program. AS 14.33.127. The following policy implements the requirements of HB 210 (2014) and further utilizes 2012 guidelines issued by the United States Department of Education in its *Restraint and Seclusion: Resource Document*.

The Board believes that a safe educational environment is necessary for learning and understands there are times when student behavior may impact on the safety of that student or others. To the maximum extent appropriate, the safety and welfare of students and staff should be secured through positive behavioral interventions. The use of physical restraint and seclusion is prohibited except in emergency situations as set forth below.

Chemical or mechanical restraint of students is never allowed. Chemical restraint means a psychopharmacological drug that is administered to a student for discipline or convenience and that is not required to treat a medical symptom. Mechanical restraint means the use of a device to restrict a student's freedom of movement but does not include the use of medical or therapeutic devices or protective gear, including gear designed to protect a student from injury due to falling, to achieve proper body position or balance, or to protect a student from self-injuring behavior.

This policy shall be annually reviewed with school personnel.

(cf. 5030 – School Discipline and Safety)
(cf. 5137 Positive School Climate)

Physical Restraint

Physical restraint means a personal restriction that immobilizes or reduces the ability of a student to move the student's arms, legs, or head freely. Physical restraint does not include briefly holding a student in order to calm or comfort, or the use of contact that is reasonably necessary to safely escort a person from one area to another

Physical restraint is prohibited unless the student's behavior poses an imminent danger of physical injury to the student or others and less restrictive interventions would be ineffective at stopping the imminent danger. To the extent possible without compromising safety, other interventions should be attempted prior to the use of restraint. Restraint must be limited to that necessary to address the emergency and must be immediately discontinued when the student no longer poses an imminent danger or when a less restrictive intervention is effective to stop the danger.

(cf. 4158 – Employee Security)
(cf. 5131.41 – Violent and Aggressive Conduct)
(cf. 5131.7 – Weapons and Dangerous Instruments)

Restraint may not be used as a form of discipline, to force compliance, as a convenience for staff, or as a substitute for appropriate educational support. The use of emergency restraint under this policy does not constitute corporal punishment.

Physical restraint must be implemented in a manner that protects the health and safety of the student and others. Restraint may be administered only by staff trained in crisis intervention, de-escalation, and safe restraint, unless a trained person is not immediately available and the circumstances are rare and present an unavoidable and unforeseen emergency. Restraint may not prevent or restrict the student from breathing or speaking nor may it restrict circulation. Prone or supine restraint, which occurs when the student is placed on his or her stomach or back, is expressly prohibited. A student's well-being must be monitored during restraint through the use of continuous face-to face contact or, if face-to-face contact is unsafe, by continuous direct visual supervision.

Seclusion

Seclusion means the involuntary confinement of a student alone in a room or area that the student is physically prevented from leaving. Seclusion does not include time-outs, a student's voluntary choice to enter a secluded environment, supervised detention or in-school suspension rooms that are utilized for instructional purposes, or suspension from school. "Time-outs" are behavior interventions to provide a student with an opportunity to regain self-control or engage in problem solving where the student is separated from other students for a limited period in a setting from which the student is not physically prevented from leaving. Time-out includes placing a student in an area of the classroom where the student observes classroom instruction but does not participate.

Seclusion of a student is prohibited unless the student's behavior poses an imminent danger of physical injury to the student or others and less restrictive interventions would be ineffective at stopping the imminent danger.

(cf. 4158 – Employee Security)
(cf. 5131.41 – Violent and Aggressive Conduct)
(cf. 5131.7 – Weapons and Dangerous Instruments)

Seclusion should last only as long as necessary to resolve the actual risk of imminent danger or when a less restrictive intervention is ineffective to stop the danger. Seclusion should never be used as a form of discipline, to force compliance, as a convenience for staff, or as a substitute for appropriate educational support.

While in a seclusion setting, a student must be continuously monitored by an adult in face-to-face contact or, if face-to-face contact is unsafe, by continuous direct visual contact with the student. Students must be provided necessities such as restroom breaks and food and water as needed. Any signs of medical distress should be immediately addressed. Seclusion must be sensitive to any particular vulnerabilities of the student and to the student's developmental level.

Students

RESTRAINT AND SECLUSION

BP 5142.3(c)

Follow-up and Review

As soon as practicable after restraint or seclusion have been used, staff shall review the incident. The review shall include review of and recommendations for adjusting or amending, as applicable, procedures, strategies, accommodations, the IEP, a student behavior plan, or additional staff training. Follow-up communication shall occur with the student and parent/legal guardian regarding the review process and outcomes.

Students with Disabilities

This policy does not prohibit the inclusion of safe restraint or seclusion in a student's Individualized Education Plan or behavioral intervention plan if determined appropriate by the IEP team after considering all less restrictive alternatives. However, in all instances, the use of physical restraint or seclusion must be in compliance with this policy.

(cf. 6159 – Individualized Education Program)

Reporting/Notification Requirements

The parent/legal guardian of a student who has been physically restrained or secluded shall be notified on the same day and provided information about the incident. .

Instances of physical restraint or seclusion shall be documented. A written report must be prepared by school personnel who restrain or seclude a student and provided to the school administrator. The report must include: the date and time of the incident; names and job titles of the school personnel who participated or supervised; a description of the conduct that preceded the incident, including efforts and strategies utilized prior to restraint or seclusion; a description of the restraint or seclusion, including duration; and a description of how the incident ended, including any further action taken. A copy of the written report shall be provided by the parent/legal guardian.

Annually, the District shall report to the Department of Education and Early Development the following information: the total number of restraints and seclusion; the number of injuries or deaths of students or personnel; the number of restraints or seclusion by untrained personnel; and the number of students with a disability who were restrained or secluded, including the category of disability.

Students

RESTRAINT AND SECLUSION

BP 5142.3(d)

Crisis Intervention Training

The Superintendent or designee shall provide for periodic crisis intervention training for a sufficient number of school staff members to meet the needs of the school population. Training should include evidence based techniques effective at preventing restraint and seclusion; evidence-based skills related to positive behavior supports, conflict prevention and management techniques, skills to de-escalate student behavior, and understanding antecedents; the safe use of restraint or seclusion in emergency situations; first aid and cardiopulmonary resuscitations; and applicable policies and procedures. The form of training may vary depending upon the staff member's role and the instructional setting.

Policy Not Applicable to Law Enforcement

This policy is applicable to District employees. It is not intended to limit the use or type of restraint or seclusion by law enforcement personnel who may need to utilize these methods while on District property.

(cf. 1410 – Interagency Cooperation for Student and Staff Safety)

Legal Reference:

UNITED STATES CODE

*20 U.S.C. §§ 1400, et seq. Individuals with Disabilities Education Act
No Child Left Behind Act of 2001, 20 U.S.C. §§ 2361-2368 (P.L. 107-110)*

ALASKA STATUTES

*11.81.430 Justification, use of force, special relationships
11.81.900 Definitions
14.03.078 Report
14.30.180-.350 Education for Exceptional Children
14.33.120 School disciplinary and safety program
14.33.125 Student restraint or seclusion; limitations
14.33.127 Crisis Intervention Training*

ALASKA ADMINISTRATIVE CODE

*4 AAC 06.172 Reporting of school disciplinary and safety programs
4 AAC 06.200-270 Safe schools
4 AAC 06.250 Reporting
4 AAC 07.010-4 AAC 07.900 Student rights and responsibilities
4 AAC 52.010-.990 Education for exceptional children*

Revised 9/2014

YAKUTAT SCHOOL DISTRICT

Adopted: June 3, 2013

Revised: October 6, 2014