

# Board of Education Regular Meeting

Monday, March 18, 2024 6:00 PM

Weston Middle School Library Learning Commons, 135 School Road, Weston, CT 06883

## I. CALL TO ORDER, VERIFICATION OF QUORUM

## II. PLEDGE OF ALLEGIANCE

II.A. I pledge allegiance to the flag of the United States of America, and to the republic for which it stands, one nation, under God, indivisible with liberty and justice for all.

## III. APPROVAL OF MINUTES

III.A. Meeting minutes from the February 12, 2024 Board of Education Regular Meeting

III.B. Meeting minutes from the February 20, 2024 Board of Education Special Meeting

## IV. STUDENT BOARD OF EDUCATION REPRESENTATIVE COMMENTS

IV.A. Discussion with WHS Student Board of Education Representatives

## V. PUBLIC COMMENT

V.A. The Board welcomes the opportunity to hear from members of the public about matters concerning Weston Public Schools. Public comment is an important chance for the Board to receive input and feedback from our school community. We listen attentively to all comments shared.

While we value and pay close attention to public comment, it is our practice not to respond substantively, or sometimes at all, during public comment. There are several reasons for this:

First, engaging in a discussion on non-agenda items could violate the Board's obligations to comply with the Freedom of Information Act.

Second, the Board or the administration may not be prepared to discuss certain matters raised in the first instance by a public comment.

Third, the Board develops its meeting agenda carefully to ensure that the Board addresses matters that are pressing or relevant at the time of the meeting.

We encourage members of the public with specific questions, concerns, or complaints about our schools to reach out directly to Superintendent Barbiero. You may also email the Board at our email address, [boardofeducation@westonps.org](mailto:boardofeducation@westonps.org).

Additional details on Public Comment at board meetings can be found on our website: [https://www.westonps.org/608477\\_3](https://www.westonps.org/608477_3)

Meeting Conduct: Bylaws of the Board #9325 - <https://meetings.boardbook.org/Public/Book/2468?docTypeId=224318&file=ab5f2950-f792-4ecc-bc14-37a3939de003>

**VI. OLD BUSINESS**

- VI.A. Weston Board of Education Policies, Regulations, and Bylaws (second read)
- VI.A.1. Discussion and vote on AR 5141.3 Health Assessments/Screenings and Oral Assessments
- VI.B. Discussion regarding board response to public comment and email communication
- VI.C. Discussion regarding board of education meeting start time and remote/in-person meetings
- VI.D. Discussion and vote (if necessary) regarding Mile of Safety Officer

**VII. NEW BUSINESS**

- VII.A. Recognition
- VII.A.1. Acceptance of WEF Donation
- VII.B. Weston Board of Education Policies, Regulations, and Bylaws (first read)
- VII.B.1. Discussion on 5131.31 Regulations Regarding Immunizations
- VII.B.2. Discussion on 5141.21 Administration of Student Medications
- VII.B.3. Discussion on 5112 Ages of Attendance
- VII.B.4. Discussion on 1312 WPS Request for Evaluation of Instructional Materials (Appendix A)
- VII.B.5. Discussion on 1312 Instructional Materials Review Committee Report (Appendix B)
- VII.B.6. Discussion on 6161 WPS Equipment Books Materials
- VII.C. Review and discussion of policy 5136 as it relates to use of private technology (cell phones)
- VII.D. Discussion on MOA regarding HSA payment schedule for WAA

**VIII. DISTRICT UPDATES**

- VIII.A. Consent Agenda
- VIII.B. Superintendent Report
- VIII.C. Pupil Personnel Services and Special Education
- VIII.D. Finance and Operations
- VIII.D.1. Discussion and vote on the 8th FY24 Financial Report, February 2024

**IX. COMMITTEE REPORTS (committee chair update, if any)**

- IX.A. Communications Committee
- IX.B. Connecticut Association of Boards of Education (CABE)

IX.C. Cooperative Educational Services (CES)

IX.D. Curriculum Committee

IX.E. Educational Optimization Committee (EOC)

IX.F. Finance & Operations Committee

IX.G. Negotiations Committee

IX.H. Policy Committee

IX.I. Weston Education Foundation (WEF)

**X. NEXT SCHEDULED MEETINGS OF THE BOARD OF  
EDUCATION**

X.A. The next regular session of the Weston Board of Education will be April 8, 2024 at 6:00 PM. This meeting will be remote.

X.B. Review of Pending Agenda Items for Next Meeting

**XI. ADJOURNMENT**

**Weston Board of Education Special Meeting**

Tuesday, February 20, 2024

9:00 AM

Remote Session

**Absent:** Peter Gordon, Chad Hoepfner, Bernie Kingsley, **Present:** Steven Ezzes, David Felton, Sharon Ferraro, Michael Guido. Present: 4, Absent: 3.

I. **Call to Order**

The meeting was called to order at 9:01 AM.

**Additional Attendees:**

Lisa Barbiero, Superintendent of Schools; Tina Henckel, Assistant Superintendent; Phillip Cross, Director of Finance and Facilities; Daniel DiVito, Director of Digital Learning and Technology; Michael DelMastro, Director of Facilities

Move that the Weston Board of Education begin the February 20, 2024 special meeting. Carried with a motion by Felton, David and a second by Guido, Michael.

Steven Ezzes: Yea, David Felton: Yea, Sharon Ferraro: Yea, Michael Guido: Yea

Yea: 4, Nay: 0

II. **Discussion and vote on updated capital budget**

Michael DelMastro, Director of Finance, presented changes to the capital budget. The team discussed the updated capital budget request for FY 25, financial aspects of projects, and the importance of prioritization. The revised capital budget of \$1,526,500 was approved.

Move that the Weston Board of Education approve the updated capital budget as presented. Carried with a motion by Ezzes, Steven and a second by Felton, David.

Steven Ezzes: Yea, David Felton: Yea, Sharon Ferraro: Yea, Michael Guido: Yea

Yea: 4, Nay: 0

III. **Adjournment**

The meeting adjourned at 9:30 AM

Move that the Weston Board of Education adjourn the February 20, 2024 special meeting. Carried with a motion by Felton, David and a second by Ferraro, Sharon.

Steven Ezzes: Yea, David Felton: Yea, Sharon Ferraro: Yea, Michael Guido: Yea

Yea: 4, Nay: 0

Respectfully submitted by:

Jodi Sacchetta, Board Clerk

**Board of Education Regular Meeting**

Monday, February 12, 2024

6:00 PM

Weston Middle School Library Learning Commons

135 School Road

Weston, CT 06883

**Present:** Steven Ezzes, David Felton, Sharon Ferraro, Peter Gordon, Michael Guido, Chad Hoepfner, Bernie Kingsley. **Present:** 7, Absent: 0.

I. **CALL TO ORDER, VERIFICATION OF QUORUM**

The meeting was called to order at 6:01 PM.  
Sharon Ferraro joined at 6:06 PM.

Additional Attendees:

Lisa Barbiero, Superintendent of Schools; Tina Henckel, Assistant Superintendent; Phillip Cross, Director of Finance and Facilities; Tracy Edwards, Director of Pupil Personnel Services; Daniel DiVito, Director of Digital Learning and Technology; Paul Rasmussen, Director of Human Resources; Joe Rios, Director of Safety and Security; Meghan Conetta, Daniel Doak, Patricia Falber, Laura Kaddis, Building Principals; Jianna Blunski, WHS Student Representative

Move that the Weston Board of Education begin the February 12, 2024 meeting. Unseconded with a motion by Ezzes, Steven.

II. **PLEDGE OF ALLEGIANCE**

A. I pledge allegiance to the flag of the United States of America, and to the republic for which it stands, one nation, under God, indivisible with liberty and justice for all.

III. **APPROVAL OF MINUTES**

A. **Meeting minutes from the January 16, 2024 Weston Board of Education Regular Meeting**

Move that the Weston Board of Education approve the January 16, 2024 Board of Education meeting minutes. Carried with a motion by Felton, David and a second by Kingsley, Bernie.

Steven Ezzes: Yea, David Felton: Yea, Peter Gordon: Yea, Michael Guido: Yea, Chad Hoepfner: Yea, Bernie Kingsley: Yea  
Yea: 6, Nay: 0

B. **Meeting minutes from the January 18, 2024 Weston Board of Education Public Forum #2**

Move that the Weston Board of Education approve the January 18, 2024 Board of Education special meeting minutes. Carried with a motion by Felton, David and a second by Kingsley, Bernie.

Steven Ezzes: Yea, David Felton: Yea, Peter Gordon: Yea, Michael Guido: Yea, Chad Hoepfner: Yea, Bernie Kingsley: Yea  
Yea: 6, Nay: 0

C. **Meeting minutes from the January 22, 2024 Weston Board of Education Special Meeting (Budget Workshop)**

Move that the Weston Board of Education approve the January 22, 2024 Board of Education special meeting minutes. Carried with a motion by Felton, David and a second by Kingsley, Bernie.  
Steven Ezzes: Yea, David Felton: Yea, Peter Gordon: Yea, Michael Guido: Yea, Chad Hoepfner: Yea, Bernie Kingsley: Yea  
Yea: 6, Nay: 0

D. **Meeting minutes from the January 23, 2024 Weston Board of Education Special Meeting (Approval and Adoption of FY 2025 Recommended Operating and Capital Budgets.**

Move that the Weston Board of Education approve the January 23, 2024 Board of Education special meeting minutes. Carried with a motion by Felton, David and a second by Kingsley, Bernie.  
Steven Ezzes: Yea, David Felton: Yea, Peter Gordon: Yea, Michael Guido: Yea, Chad Hoepfner: Yea, Bernie Kingsley: Yea  
Yea: 6, Nay: 0

E. **Meeting minutes from the February 1, 2024 Weston Board of Education Executive Session**

Move that the Weston Board of Education approve the February 1, 2024 Board of Education executive session minutes Carried with a motion by Felton, David and a second by Kingsley, Bernie.  
Steven Ezzes: Yea, David Felton: Yea, Peter Gordon: Yea, Michael Guido: Yea, Chad Hoepfner: Yea, Bernie Kingsley: Yea  
Yea: 6, Nay: 0

IV. **RECOGNITION**

A. **Recognition of former Weston Board of Education Member/Vice Chairperson Melissa Walker**

Superintendent Barbiero recognized Melissa Walker for her years of service on the Board of Education. Chair Steven Ezzes, Vice Chair Peter Gordon, Sharron Ferraro and Bernadette Kingsley also commended Ms. Walker for her time on the Board.

B. **Recognition of Teacher of the Year Sharon Huynh**

Assistant Superintendent Tina Henckel recognized Sharon Huynh as Weston 2024 Teacher of the Year.

V. **STUDENT BOARD OF EDUCATION REPRESENTATIVE COMMENTS**

A. Discussion with WHS Student Board of Education Representatives  
Jianna Blunchi informed the board of the current initiatives taking place at WHS; a pep rally, food donation drive, the junior class decorated the hallways for Valentine's Day and the senior class is selling items to raise additional money for graduation activities. She talked about Holocaust Remembrance Day activities and how engaged the students were and a Challenge Success presentation that was made available to students and parents in

grades 8-12.

VI. **PUBLIC COMMENT**

The Board welcomes the opportunity to hear from members of the public about matters concerning the Weston Public Schools. Public comment is an important chance for the Board to receive input and feedback from our school community. We listen attentively to all comments shared.

While we value and pay close attention to public comment, it is our practice not to respond substantively, or sometimes at all, during public comment. There are several reasons for this:

First, engaging in a discussion on non-agenda items could violate the Board's obligations to comply with the Freedom of Information Act.

Second, the Board or the administration may not be prepared to discuss certain matters raised in the first instance by a public comment. Board discussions typically involve a great deal of preparation by the administration and the Board to facilitate meaningful and productive deliberations in public. Similarly, the Board or the administration may not have answers prepared to questions posed by community members during Board meetings, and may need to follow up at a later time.

Third, the Board develops its meeting agenda carefully to ensure that the Board addresses matters that are pressing or relevant at the time of the meeting. Responding to each public comment could take away the time the Board has to cover its agenda items, which could risk impacting school district operations. We encourage members of the public with specific questions, concerns, or complaints about our schools to reach out directly to Superintendent Barbiero or the appropriate member of the administration. You may also email the Board at our email address, which can be found on the district website, [https://www.westonps.org/353610\\_2](https://www.westonps.org/353610_2)

Meeting Conduct: Bylaws of the Board #9325 - <https://meetings.boardbook.org/Public/Book/2468?docTypeId=224318&file=ab5f2950-f792-4ecc-bc14-37a3939de003>

The following individuals spoke during public comment:

Gus Christensen, Norfield Road  
Ethan Blinder, Greenlea Lane

VII. **OLD BUSINESS**

A. **Discussion and vote on a change to the April/May Weston Board of Education schedule**

Superintendent Barbiero asked the board to consider moving the May 1 board meeting date to April 8. The administration needs to have

the meeting in April due to administrative tasks that need to take place and communication that needs to happen.

Move that the Weston Board of Education accept the change to the regular meeting schedule and change the May 1 meeting date to April 8 Carried with a motion by Felton, David and a second by Ferraro, Sharon.

Steven Ezzes: Yea, David Felton: Yea, Sharon Ferraro: Yea, Peter Gordon: Yea, Michael Guido: Yea, Chad Hoepfner: Yea, Bernie Kingsley: Yea  
Yea: 7, Nay: 0

**B. District Improvement Plan (DIP): Mid-Year Progress**

Superintendent Barbiero presented the midyear review of District Goals and Aligned Action Steps. Members of central office administration along with building administrators walked the board through the presentation which focused on the following areas:

- Academic Excellence: Curriculum and Instruction (Math, ELA/Reading and Science)
- School Climate and Culture
- Information Literacy/Technology
- Human Resources & Finance
- Safety and Security
- Future Planning - Board of ED & WPS Administration

The presentation covered:

- How are we making progress towards our Spring of 2024 goals?
- What are the quantitative and qualitative data we reviewed to measure our progress?
- What are some areas of focus for the second half of the year that we believe to help us meet our Spring goals?

At the end of this presentation, Michael Guido referenced the Safety & Security part of the presentation, specifically relating to the addition of a second Mile of Safety Officer. Chair Steven Ezzes explained that the cost of the current Mile of Safety Officer is currently a 60/40 split between Weston Public Schools (60%) and the Town of Weston (40%). If we were to add another Mile of Safety Officer, we would need to try and negotiate a cost share with the Town or be prepared to absorb the full cost.

David Felton made a motion to add an agenda item to the February 12, 2024 meeting. This agenda item provides for a discussion and recommendation on adding a second mile of safety officer to the FY25 budget. Second by: Michael Guido  
Carried with a motion by Felton, David and a second by Guido, Michael.

Steven Ezzes: Yea, David Felton: Yea, Sharon Ferraro: Yea, Peter Gordon: Yea, Michael Guido: Yea, Chad Hoepfner: Yea, Bernie Kingsley: Yea  
Yea: 7, Nay: 0

The agenda item was added, and a discussion took place with regard to adding a second mile of safety officer for Weston Public Schools. The cost for this position was discussed; full cost to the board vs shared cost with the Town of Weston.

Move that the Weston Board of Education recommend adding a second mile of safety officer to the FY25 budget and begin discussions regarding cost with the Town of Weston.

Carried with a motion by Felton, David and a second by Guido, Michael.

Steven Ezzes: Yea, David Felton: Yea, Michael Guido: Yea, Chad Hoepfner: Yea, Bernie Kingsley: Yea; Sharon Ferraro: Nay, Peter Gordon: Nay,  
Yea: 5, Nay: 2

The board will now go back and have conversations with Chief Henion and the Town (BOS and BOF) to see whether this is fiscally feasible. Superintendent Barbiero indicated this would be an agenda item at the March meeting to provide an update.

#### **VIII. NEW BUSINESS**

##### **A. Weston Board of Education Policies, Regulations, and Bylaws (first read)**

###### **1. Discussion of AR 4142.3 Health Assessments/Screenings and Oral Assessments**

The first read of this policy was presented by Sharon Ferraro, Policy Committee Chair. The district nurse supervisor presented the policy updates and changes to the policy committee. Ms. Ferraro indicated that these changes are necessary to codify the process currently in place and align with state requirements.

#### **IX. DISTRICT UPDATES**

##### **A. Consent Agenda**

Paul Rasmussen, Director of Human Resources, presented the February 2024 consent agenda to the board and asked for the board to accept it.

Move that the Weston Board of Education accept the consent agenda as presented. Carried with a motion by Felton, David and a second by Ferraro, Sharon.

Steven Ezzes: Yea, David Felton: Yea, Sharon Ferraro: Yea, Peter

Gordon: Yea, Michael Guido: Yea, Chad Hoepner: Yea, Bernie Kingsley: Yea  
Yea: 7, Nay: 0

**B. Superintendent Report**

Superintendent Barbiero notified the board that school will be coed tomorrow due to inclement weather. No additional updates since numerous topics were discussed during the midyear update.

**C. Pupil Personnel Services and Special Education**

Tracy Edwards, Director of Pupil Personnel Services, announced that Allison Brett, our new Assistant Director of PPS, will be starting on Tues, February 13. There was an extensive interview process and Allison was an outstanding candidate.

The next PPS/SPED parent meeting will be on February 27. Our regional representative from the Department of Developmental Services (DDS), Ms. Kaitlyn Drenzek, will provide a comprehensive overview of steps families need to take to qualify for DDS services if their children have an intellectual disability or autism. She will also highlight DDS's role in supporting eligible students once they age out of special education services.

**D. Finance and Operations**

**1. Discussion and vote on the FY24 January 2024 Financial Report**

Phillip Cross, Director of Finance and Operations, presented the January FY24 financial report and asked the board to accept the report as presented.

Move that the Weston Board of Education approve the FY24 January 2024 Financial Report as presented. Carried with a motion by Felton, David and a second by Hoepner, Chad.

Steven Ezzes: Yea, David Felton: Yea, Sharon Ferraro: Yea, Peter Gordon: Yea, Michael Guido: Yea, Chad Hoepner: Yea, Bernie Kingsley: Yea  
Yea: 7, Nay: 0

**X. COMMITTEE REPORTS (committee chair update, if any)**

A. Communications Committee

B. Connecticut Association of Boards of Education (CABE)

C. Cooperative Educational Services (CES)

D. Curriculum Committee

E. Educational Optimization Committee (EOC)

F. Finance & Operations Committee

G. Negotiations Committee (committee not currently active)

H. Policy Committee

I. Weston Education Foundation (WEF)

XI. **NEXT SCHEDULED MEETINGS OF THE BOARD OF EDUCATION**

A. **March 18, 2024 at 6:00 PM: Board of Education Meeting. This meeting will be in-person in the Weston Middle School Library.**

B. **Review of Pending Agenda Items for Next Meeting**

The following items will be on the agenda for the March 18 meeting:

- Discussion regarding time of meetings and remote vs in-person
- Follow-up discussion on adding an additional Mile of Safety Officer to the FY25 budget

XII. **ADJOURNMENT**

Meeting adjourned at 9:10 AM.

Move that the Weston Board of Education adjourn the February 12, 2024 meeting. Carried with a motion by Gordon, Peter and a second by Kingsley, Bernie.

Steven Ezzes: Yea, David Felton: Yea, Sharon Ferraro: Yea, Peter

Gordon: Yea, Michael Guido: Yea, Chad Hoepner: Yea, Bernie Kingsley:

Yea

Yea: 7, Nay: 0

Respectfully submitted by:

Jodi Sacchetta, Board Clerk

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Chairperson

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Superintendent

**ADMINISTRATIVE REGULATIONS REGARDING HEALTH ASSESSMENTS/SCREENINGS AND ORAL HEALTH ASSESSMENTS**

I. Health Assessments:

The ~~Weston~~ Board of Education (the “Board”) requires each student enrolled in the ~~Weston~~ Public Schools (the “District”) to undergo health assessments as mandated by state law. The purpose of such health assessments shall be to ascertain whether a student has any physical disability tending to prevent the student from receiving the full benefit of school work and to ascertain whether school work should be modified in order to prevent injury to the student or to secure a suitable program of education for the student. Such health assessments must be conducted by one of the following qualified providers for health assessments: (1) a legally qualified practitioner of medicine; (2) an advanced practice registered nurse or registered nurse, who is licensed under state statute; (3) a physician assistant, who is licensed under state statute; (4) the school medical advisor; or (5) a legally qualified practitioner of medicine, an advanced practice registered nurse or a physician assistant stationed at any military base. The Board will provide written prior notice of the health assessments required under these administrative regulations to the parent or guardian of each student subject to assessment. The parent or guardian shall be provided a reasonable opportunity to be present during such assessment, or the parent or guardian may provide for such assessment. No health assessment shall be made of any public school student unless it is made in the presence of the parent or guardian or in the presence of another school employee. Any student who fails to obtain the health assessments required by these administrative regulations may be denied continued attendance in the District.

II. Health Assessments Required:

Prior to enrollment in the District, each student must undergo a health assessment, which shall include:

- (a) a physical examination which includes hematocrit or hemoglobin tests, height, weight, blood pressure, and a chronic disease assessment which shall include, but not be limited to, asthma. The assessment form shall include (1) a check box for the provider conducting the assessment, to indicate an asthma diagnosis, (2) screening questions relating to appropriate public health concerns to be answered by the parent or guardian, and (3) screening questions to be answered by such provider;

- (b) an updating of immunizations as required by state law;
- (c) vision, hearing, speech, and gross dental screenings;
- (d) such other information, including health and developmental history, as the physician feels is necessary and appropriate.

The pre-enrollment assessment shall also include tests for tuberculosis, sickle cell anemia, or Cooley's anemia, and tests for lead levels in the blood if, after consultation with the school medical advisor and the local health department, the Board determines that such tests are necessary. Such tests must be conducted by a registered nurse acting pursuant to the written order of a physician or physician's assistant, licensed under state law, or an advanced practice registered nurse, licensed under state law.

Each student enrolled in the District must undergo a health assessment ~~in~~ prior to entering grade seven ~~[the Board may choose to set the screening requirement in grade six or grade seven]~~ and ~~in~~ prior to entering grade nine ~~[the Board may choose to set the screening requirement in grade nine or grade ten]~~, which shall include:

- (a) a physical examination which includes hematocrit or hemoglobin tests, height, weight, blood pressure, and a chronic disease assessment which shall include, but not be limited to, asthma as defined by the Commissioner of Public Health pursuant to subsection (c) of section 19a-62a of the Connecticut General Statutes. The assessment form shall include (1) a check box for the provider conducting the assessment, to indicate an asthma diagnosis, (2) screening questions relating to appropriate public health concerns to be answered by the parent or guardian, and (3) screening questions to be answered by such provider;
- (b) an updating of immunizations as required by state law;
- (c) vision, hearing, postural, and gross dental screenings;
- (d) such other information, including health and developmental history, as the physician feels is necessary and appropriate.

The grade ~~six~~/seven and grade nine/~~ten~~ assessments shall also include tests for tuberculosis and sickle cell anemia or Cooley's anemia if, after consultation with the school medical advisor and the local health department, the Board determines that such tests are necessary. Such tests must be conducted by a registered nurse acting pursuant to the written order of a physician or physician's assistant, licensed under state law, or of an advanced practice registered nurse, licensed under state law.

The Board shall provide such assessments free of charge to students whose parents or guardians meet the eligibility requirements for free and reduced price meals under the National School Lunch Program or for free milk under the special milk program.

### III. Oral Health Assessments:

- A. Prior to enrollment in the District, prior ~~in~~ to entering grade seven, ~~[the Board may choose to request the assessment in either grade six or grade seven]~~ and ~~in prior to entering grade nine [the Board may choose to request the assessment in either grade nine or grade ten]~~, the Board shall request that each student undergo an oral health assessment. Such oral health assessments must be conducted by one of the following qualified providers for oral health assessments: (1) a dentist licensed under state law; (2) a dental hygienist licensed under state law; (3) a legally qualified practitioner of medicine trained in conducting oral health assessments as a part of a training program approved by the Commissioner of Public Health; (4) a physician assistant licensed under state law and trained in conducting oral health assessments as part of a training program approved by the Commissioner of Public Health; or (5) an advanced practice registered nurse licensed under state statute and trained in conducting oral health assessments as part of a training program approved by the Commissioner of Public Health.
- B. The oral health assessment identified in subsection A above shall include a dental examination by a dentist, or a visual screening and risk assessment for oral health conditions by a dental hygienist, legally qualified practitioner of medicine, physician assistant, or advanced practice registered nurse. The assessment form shall include a check box for the qualified provider conducting the assessment to indicate any low, moderate, or high risk factors associated with any dental or orthodontic appliance, saliva, gingival condition, visible plaque, tooth demineralization, carious lesions, restorations, pain, swelling or trauma.
- C. No oral health assessment shall be made of any public school student unless the parent or guardian of the student consents to such assessment and such assessment is made in the presence of the parent or guardian or in the presence of another school employee. The parent or guardian shall be provided with prior written notice of an oral health assessment and be provided with a reasonable opportunity to opt the child out of such assessment, or the parent or guardian may provide for such oral health assessment.
- D. If the Board hosts a free oral health assessment event where qualified providers (identified in subsection A above) perform oral health assessments of children attending a public school, the Board shall notify the parents and guardians of such children of the event in advance and provide an opportunity for parents and guardians to opt their child(ren) out of such event. The Board shall infer parent/guardian consent for each child whose parent or guardian did not opt theoptthe child out of the free oral health assessment event and shall provide such child with a free oral health assessment; however, such child shall not receive dental treatment of any kind unless the child's parent or guardian provides informed consent for such treatment.

- E. Any student who fails to obtain an oral health assessment requested by the Board shall not be denied enrollment or continued attendance in the District.

IV. Screenings Required:

The Board will provide annually to each student enrolled in kindergarten and grades one and three to five, inclusive, a vision screening. Such vision screening may be performed using a Snellen chart or an equivalent screening device, or an automated vision screening device. The District Nurse Supervisor or his/her designee ~~Superintendent~~ shall give written notice to the parent or guardian of each student (1) who is found to have any defect of vision or disease of the eyes, with a brief statement describing the defect or disease and a recommendation that the student be examined by an optometrist or ophthalmologist licensed pursuant to state law, and (2) who did not receive such vision screening, with a brief statement explaining why such student did not receive such vision screening.

The Board will provide annually to each student enrolled in kindergarten and grades one and three through five, inclusive, audiometric screening for hearing. The District Nurse Supervisor or his/her designee ~~Superintendent~~ shall give written notice to the parent or guardian of each student (1) who is found to have any impairment or defect of hearing, with a brief statement describing the impairment or defect, and (2) who did not receive an audiometric screening for hearing, with a brief statement explaining why such student did not receive an audiometric screening for hearing.

The Board will provide postural screenings for (1) each female student in grades five and seven, and (2) each male student in grade eight or nine. The District Nurse Supervisor or his/her designee ~~Superintendent~~ shall give written notice to the parent or guardian of each student (A) who evidences any postural problem, with a brief statement describing such evidence, and (B) who did not receive a postural screening, with a brief statement explaining why such student did not receive such postural screening.

All of the screenings required under these administrative regulations will be performed in accordance with regulations applicable to such screenings as adopted by the State Board of Education.

V. Assessment/Screening Results:

The results of each assessment and screening required or requested by these administrative regulations shall be recorded on forms supplied by the State Board of Education. Each qualified provider performing health assessments or oral health assessments under these administrative regulations shall sign each form and any recommendations concerning a student shall be in writing. Assessment/screening forms shall be included in the cumulative health record of each student, and they shall be kept

on file in the school attended by the student. If a student transfers to another school district in Connecticut, the student's original cumulative health record shall be sent to the chief administrative officer of the new school district and a true copy retained by the Board. For a student leaving Connecticut, a copy of the records, if requested, should be sent and the original maintained.

Appropriate school health personnel shall review the results of each assessment and screening. If the reviewing school health personnel judge that a student is in need of further testing or treatment, the District Nurse Supervisor or his/her designee ~~Superintendent~~ shall give written notice to the parent or guardian of such student and shall make reasonable efforts to ensure that such further testing or treatment is provided. Reasonable efforts shall include determination of whether the parent or guardian has obtained the necessary testing or treatment for the student, and, if not, advising the parent or guardian how such testing or treatment may be obtained. The results of such further testing or treatment shall be recorded, kept on file and reviewed by appropriate school health personnel in the same manner as the results of the health assessments and screenings required or requested under these administrative regulations.

The District shall report to the local health department and the Department of Public Health, on a triennial basis, the total number of children per school and on a district-wide basis having a diagnosis of asthma (1) at the time of public school enrollment, (2) in grade six or seven, and (3) in grade nine or ten. The report shall contain the asthma information collected as required under Section II of these administrative regulations and shall include information regarding each diagnosed child's age, gender, race, ethnicity, and school.

VI. Exemption:

Nothing in these administrative regulations shall be construed to require any student to undergo a physical or medical examination or treatment, or be compelled to receive medical instruction, if the parent or legal guardian of such student or the student, if the student is an emancipated minor or is eighteen (18) years of age or older, notifies the teacher or principal or other person in charge of such student in writing that the student objects on religious grounds to such physical or medical examination or treatment or medical instruction.

VII. Other Non-Emergency Invasive Physical Examinations and Screenings:

- A. In addition to the screenings listed above, the District may, from time to time, require students to undergo additional non-emergency, invasive physical examination(s)/screening(s).
- B. A non-emergency, invasive physical examination or screening is defined as:
  - 1. any medical examination that involves the exposure of private body parts; or

2. any act during such examination that includes incision, insertion, or injection into the body, but does not include a hearing, vision, or scoliosis screening; and
  3. is required as a condition of attendance, administered by the school and scheduled by the school in advance; and
  4. is not necessary to protect the immediate health and safety of the student, or of other students.
- C. If the district elects to conduct any such examinations, then, at the beginning of the school year, the administration shall give direct notice to parents of affected students of the district's intent to conduct the non-emergency invasive physical examination(s) and/or screening(s) described in this subsection. Such notice shall include the specific or approximate dates during the school year of the administration of such non-emergency invasive physical examination(s)/screening(s).
- D. Upon request, the administration shall permit parents or students over the age of eighteen (18) (or emancipated minors) to opt out of participation in the non-emergency invasive physical examination(s)/screening(s) described in this subparagraph.

VIII. School Representative to Receive Information Concerning Health Assessments:

The Board designates the District Nurse Supervisor -or School Nurse~~insert name of responsible staff member~~ as the representative for receipt of reports from health care providers concerning student health assessments and oral health assessments.

Legal References:

*State Law:*

Connecticut General Statutes:

§ 10-206	Health assessments
§ 10-206a	Free health assessments
§ 10-206d	Oral health assessments
§ 10-208	Exemption from examination or treatment
§ 10-209	Records not be public. Provision of reports to schools
§ 10-214	Vision, audiometric and postural screenings: When required; notification of parents re defects; record of results

Public Act. No. 21-95, “An Act Concerning Assorted Revisions and Additions to the Education Statutes.”





**SAMPLE  
NOTICE OF FREE ORAL HEALTH ASSESSMENT**

The \_\_\_\_\_ Public Schools (the “District”) shall hold a free oral health assessment event for students on \_\_\_\_\_ *[insert date and time of event]* at your student’s school. The oral health assessment shall consist of *[insert one of the following options depending on the professional staffing the oral health assessment event: (1) a dental examination by a dentist OR (2) a visual screening and risk assessment for oral health conditions by a dental hygienist, legally qualified practitioner of medicine, physician assistant, or advanced practice registered nurse.]* The practitioner conducting the oral health assessment shall indicate any low, moderate r high risk factors associated with any dental or orthodontic appliance, saliva, gingival condition, visible plaque, tooth demineralization, carious lesions, restorations, pain, swelling or trauma. No student shall receive dental treatment of any kind as part of the free oral health assessment event.

This event is free of charge. You may be present during the oral health assessment of your student, if you so wish. When, based on the results of the assessment and in the judgment of school health personnel, your student is in need of further testing or treatment, you will be notified by the District.

You may elect for your student not to participate in the free oral health assessment event. **If you do not want your student to participate, you must sign the form below and return that section of the form to \_\_\_\_\_ by \_\_\_\_\_. If you fail to return the form by this date, you have consented to the free oral health assessment and your student will participate. If your student does not participate in the school’s event, you will be asked to provide documentation that your student has received an oral health assessment, in accordance with state law.**

If you have questions or concerns regarding the free oral health assessment event, please contact \_\_\_\_\_

**FREE ORAL HEALTH ASSESSMENT EVENT - \_\_\_\_\_ *[insert date of event]***

Name of student: \_\_\_\_\_ Student’s Date of Birth: \_\_\_\_\_

Student’s Address: \_\_\_\_\_

Parent/Guardian Name (print): \_\_\_\_\_

As the parent/guardian of the above named student, I elect for my student to not participate in the free oral health assessment. I understand that I will be asked by school officials to provide documentation that my student has received an oral health assessment by a qualified professional. I further understand that this “opt-out” is effective only for the free oral health assessment event being held on the date listed above.

\_\_\_\_\_  
Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Revised 8/1/2018

## BOE PROPOSED TEMPLATE RESPONSES TO EMAILS AND PUBLIC COMMENT

1. ***Responding to questions or feedback about matters that came before the Board or are anticipated to come before the Board.***

Dear \_\_\_\_\_:

Thank you for your email. Your feedback is very important to us.

The Board discussed [describe issue] during its meeting on [date] [or: The Board plans to discuss [describe issue] during its meeting scheduled for [date]. [Following deliberations, the Board voted to [describe vote].]

[The Board intends to discuss this matter again during its meeting scheduled for [date]. We encourage you to watch the meeting and hear our further discussion on this matter.]

Thank you again for reaching out. We appreciate your [comments/questions].

Kind regards,

2. ***Responding to questions or feedback about matters normally addressed by the administration, not the Board. Examples of such matters include matters related to students, grades, personnel, facilities repair/complaints, and extracurricular activities.***

Dear \_\_\_\_\_:

Thank you for your email. Matters pertaining to [describe – e.g., students, personnel, facilities repair, athletics, extracurricular activities] generally are addressed by the administration. I have therefore referred this matter to Superintendent Barbiero.

Please feel free to reach out directly to Superintendent Barbiero or another member of the administration with any further questions.

Kind regards,

3. ***Responding to FOIA requests.***

Dear \_\_\_\_\_:

Thank you for your email. Requests made of the Board pursuant to the Connecticut Freedom of Information Act (FOIA) are processed by members of our administrative team. I have therefore forwarded your email below to Superintendent Barbiero for follow-up in accordance with the FOIA.

Please feel free to reach out directly to Superintendent Barbiero with any questions.

Kind regards,

4. ***Draft Statement Regarding Public Comment***

The Board welcomes the opportunity to hear from members of the public about matters concerning the Weston Public Schools. Public comment is an important chance for the Board to receive input and feedback from our school community. We listen attentively to all comments shared.

While we value and pay close attention to public comment, it is our practice not to respond substantively, or sometimes at all, during public comment. There are several reasons for this:

First, engaging in a discussion on non-agenda items could violate the Board's obligations to comply with the Freedom of Information Act.

Second, the Board or the administration may not be prepared to discuss certain matters raised in the first instance by a public comment.-

Third, the Board develops its meeting agenda carefully to ensure that the Board addresses matters that are pressing or relevant at the time of the meeting.

We encourage members of the public with specific questions, concerns, or complaints about our schools to reach out directly to Superintendent. You may also email the Board at our email address, [wpsboardofeducation@westonps.org](mailto:wpsboardofeducation@westonps.org)

**BOE MEETINGS**  
**VIRTUAL/IN PERSON COMPARISON**  
**January 2023 - February 2024**

Meeting Date	Virtual or In-Person?	Total Public Comments	Total Watching in Person	Total Watching YouTube	Total Watching Zoom	Total Watching Live Virtual	Total Views of Recorded Meeting
2/12/24	In Person	2	3	13		13	71
1/16/24	Virtual	1		11	11	22	36
12/18/23	Virtual	4		11	16	27	78
11/20/23	Virtual	5		12	15	27	72
10/16/23	Virtual	0		13	2	15	109
9/18/23	In Person	0		10		10	95
6/20/23	Virtual	2		9	7	16	90
5/15/23	In Person	0		14		14	118
4/18/23	In Person	22	10	20		20	186
3/13/23	Virtual	0		15	7	22	78
2/13/23	Virtual	1		5	8	13	104
1/17/23	Virtual	0		9	5	14	70

It should be noted that attendance is not taken at any meetings. Data for virtual meeting attendance is compiled electronically.

Data for in-person meetings reflects those in attendance who make a comment. Total watching in-person is an estimate.



**Gifts, Grants and Bequests Approval Form**

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Gifts Valued Over \$3,000:

All gifts valued at over \$3,000 must be approved by the Board of Education before being accepted.

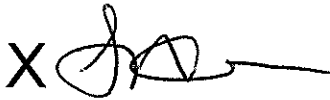
School/Building:  HES  WIS  WMS  WHS  CO

Name of Donor: Weston Education Foundation

Value of gift(s) being donated): \$ 12,000

Description (enter description or see attached, and include back up): Teacher Leader Fellowship Academy professional learning series for district teachers and administrators for 2023-24

Signature/Approval:

X 

Principal Signature

X 

Superintendent Signature

Date: 2/21/24

Date: 2/23/2024

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**Board of Education Approval**

Not required

Yes (If yes, date of Board of Education Approval: \_\_\_/\_\_\_/\_\_\_)

No

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**ADMINISTRATIVE REGULATIONS REGARDING IMMUNIZATIONS****I. Immunization Requirements**

In accordance with state law and accompanying regulations, the Weston Public Schools (the “District”) requires each child to be protected by adequate immunization against diphtheria, pertussis, tetanus, poliomyelitis, measles, mumps, rubella, haemophilus influenzae type B, hepatitis A, hepatitis B, varicella, pneumococcal diseases, meningococcal disease and any other vaccine required by the schedule for active immunization as determined by the Commissioner of Public Health pursuant to Conn. Gen. Stat. § 19a-7f, before being permitted to enroll in any program or school under its jurisdiction.

Among other requirements, before being permitted to enter seventh grade, the District requires each child to be vaccinated against meningococcal disease. The District further requires each child to receive a second immunization against measles and tetanus, diphtheria and pertussis (Tdap) before being permitted to enter seventh grade.

Further, each child must have received two doses of immunization against varicella before being permitted to enter kindergarten and seventh grade, and each child must have received two doses of immunization against rubella and mumps before being permitted to enter grades kindergarten through twelve.

~~*If the District operates a preschool program, the following language should be added:*~~

~~By January 1 of each year, children aged 24-59 months enrolled in the District’s preschool program must show proof of receipt of at least one dose of influenza vaccine between August 1 and December 31 of the preceding year. All children aged 24-59 months who have not received vaccination against influenza previously must show proof of receipt of two doses of the vaccine the first influenza season that they are vaccinated. Children seeking to enroll in the District’s preschool program between January 1 and March 31 are required to receive the influenza vaccine prior to being permitted to enter the program. Children who enroll in the preschool program after March 31 of any given year are not required to meet the influenza vaccine requirement until the following January.~~

Exemption from the applicable requirements of these administrative regulations shall be granted to any child who, before being permitted to enroll:

- (1) presents a certificate from a physician, physician assistant, advanced practice registered nurse or local health agency stating that initial immunizations have been given to such child and additional immunizations are in process
  - (A) under guidelines and schedules specified by the Commissioner of Public Health; or
  - (B) in the case of a child enrolled in a preschool program or other prekindergarten program who, prior to April 28, 2021, was exempt from the applicable immunization requirements upon presentation of a statement that such immunizations would be contrary to the religious beliefs of such child or the parents or guardian of such child, as such additional immunizations are recommended, in a written declaration, in a form prescribed by the Commissioner of Public Health, for such child by a physician, a physician assistant or an advanced practice registered nurse. Such statement of religious beliefs shall be acknowledged by a judge of a court of record or a family support magistrate, a clerk or deputy clerk of a court having a seal, a town clerk, a notary public, a justice of the peace, an attorney admitted to the bar of this state, or a school nurse; or
- (2) presents a certificate, in a form prescribed by the Commissioner of Public Health pursuant to Section 7 of Public Act No. 21-6, from a physician, physician assistant, or advanced practice registered nurse stating that in the opinion of a such physician, physician assistant, or advanced practice registered nurse such immunization is medically contraindicated because of the physical condition of such child; or
- (3) in the case of measles, mumps or rubella, presents a certificate from a physician, physician assistant or advanced practice registered nurse or from the Director of Health in such child's present or previous town of residence, stating that the child has had a confirmed case of such disease; or
- (4) in the case of haemophilus influenzae type B, has passed such child's fifth birthday; or
- (5) in the case of pertussis, has passed such child's sixth birthday.

## II. Exemptions Based on Religious Beliefs

### A. Children Enrolled in Kindergarten Through Twelfth Grade On or Before April 28, 2021

The immunization requirements set forth in Section I of these administrative regulations **shall not apply** to any child who is enrolled in kindergarten through twelfth grade on or before April 28, 2021 if:

1. such child presented a statement, prior to April 28, 2021, from the parents or guardians of such child that such immunization is contrary to the religious beliefs of such child or the parents or guardians of such child, and
2. such statement was acknowledged by a judge of a court of record or a family support magistrate, a clerk or deputy clerk of a court having a seal, a town clerk, a notary public, a justice of the peace, an attorney admitted to the bar of the State of Connecticut, or a school nurse.

B. Students Who Transfer from Another Public or Private School in Connecticut

The immunization requirements set forth in Section I of this policy **shall not apply** to any student who:

1. transfers to the District from another public or private school in Connecticut, and
2. was enrolled in kindergarten through twelfth grade in the other public or private school on or before April 28, 2021, and
3. presented a statement, prior to April 28, 2021, from the parents or guardians of such child that such immunization is contrary to the religious beliefs of such child or the parents or guardians of such child, and such statement was acknowledged by a judge of a court of record or a family support magistrate, a clerk or deputy clerk of a court having a seal, a town clerk, a notary public, a justice of the peace, an attorney admitted to the bar of the State of Connecticut, or a school nurse.

C. Children Enrolled in Preschool or Prekindergarten Prior to April 28, 2021

Any child who is enrolled in a preschool program or other prekindergarten program prior to April 28, 2021 who:

1. presented a statement, prior to April 28, 2021, from the parents or guardians of such child that such immunization is contrary to the religious beliefs of such child or the parents or guardians of such child, and
2. such statement was acknowledged by a judge of a court of record or a family support magistrate, a clerk or deputy clerk of a court

having a seal, a town clerk, a notary public, a justice of the peace, an attorney admitted to the bar of the State of Connecticut, or a school nurse, but

3. did not present a written declaration from a physician, a physician assistant or an advanced practice registered nurse stating that additional immunizations are in process as recommended by such physician, physician assistant or advanced practice registered nurse, rather than as recommended under guidelines and schedules specified by the Commissioner of Public Health

**shall comply** with the immunization requirements provided for in Section I of these administrative regulations on or before September 1, 2022, or not later than fourteen (14) days after transferring to a program operated by a school under the jurisdiction of the District, whichever is later.

In accordance with state law, the Weston Board of Education (“Board”) and the District shall not be liable for civil damages resulting from an adverse reaction to a nondefective vaccine required to be administered by state law.

If the parents or guardians of any child are unable to pay for any required immunization, the expense of such immunization shall, upon the recommendation of the Board, be paid by the town of the child’s residence.

The District designates ~~[insert name of responsible staff member]~~ the school nurse as the representative for receipt of reports from health care providers concerning student immunizations.

The current required immunizations for elementary (including preschool), middle and high school students can be found at:  
~~[https://portal.ct.gov/-/media/SDE/School-Nursing/Forms/Immunization\\_Requirements.pdf](https://portal.ct.gov/-/media/SDE/School-Nursing/Forms/Immunization_Requirements.pdf)~~  
[https://portal.ct.gov/-/media/SDE/School-Nursing/Publications/Immunization\\_Requirements.pdf](https://portal.ct.gov/-/media/SDE/School-Nursing/Publications/Immunization_Requirements.pdf)

In implementing these regulations, the District shall consider state guidance and supporting documents and comply with applicable law.

Legal Reference: Connecticut General Statutes  
§ 10-204a Required immunizations  
§ 10-204c Immunity from liability  
Public Act No. 21-6, “An Act Concerning Immunizations”

Regulations of Connecticut State Agencies  
§ 10-204a-2a Adequate Immunization

Letter to Superintendents of Schools et al. from Connecticut State Departments of Public Health and Education, *Reinstatement of Prekindergarten and Kindergarten School Immunization Entry Requirement for Haemophilus Influenza Type B (Hib) Vaccine*, June 25, 2010.

Letter to Superintendents of Schools et al. from Connecticut State Departments of Public Health and Education, *Changes in the Immunization Requirements for School Entry*, March 15, 2011.

State Department of Education, Guidance Regarding Public Act 21-6, “An Act Concerning Immunizations,” May 25, 2021.

ADOPTED May 21, 2018

REVISED: \_\_\_\_\_

~~6/25/2021~~



~~Series 5000~~ 5141.21

Students

## ADMINISTRATION OF STUDENT MEDICATIONS IN THE SCHOOLS

### A. Definitions

Administration of medication means any one of the following activities: handling, storing, preparing or pouring of medication; conveying it to the student according to the medication order; observing the student inhale, apply, swallow, or self-inject the medication, when applicable; documenting that the medication was administered; and counting remaining doses to verify proper administration and use of the medication.

Authorized prescriber means a physician, dentist, optometrist, advanced practice registered nurse or physician assistant, and, for interscholastic and intramural athletic events only, a podiatrist.

Before or after school program means any child care program operated and administered by the ~~Weston~~ Weston Board of Education (the "Board") and exempt from licensure by the Office of Early Childhood pursuant to subdivision (1) of subsection (b) of Section 19a-77 of the Connecticut General Statutes. Such programs do not include public or private entities licensed by the Office of Early Childhood or Board enhancement programs and extra-curricular activities.

Cartridge injector means an automatic prefilled cartridge injector or similar automatic injectable equipment used to deliver epinephrine in a standard dose for emergency first aid response to allergic reactions.

Coach means any person holding a coaching permit who is hired by the Board to coach for a sport season.

Controlled drugs means those drugs as defined in Conn. Gen. Stat. Section 21a-240.

Cumulative health record means the cumulative health record of a pupil mandated by Conn. Gen. Stat. Section 10-206.

Director means the person responsible for the day-to-day operations of any school readiness program or before or after school program.

Eligible student means a student who has reached the age of eighteen or is an emancipated minor.

Error means:

- (1) the failure to do any of the following as ordered:
  - (a) administer a medication to a student;
  - (b) administer medication within the time designated by the prescribing physician;
  - (c) administer the specific medication prescribed for a student;
  - (d) administer the correct dosage of medication;
  - (e) administer medication by the proper route;
  - (f) administer the medication according to generally accepted standards of practice; or
- (2) the administration of medication to a student which is not ordered, or which is not authorized in writing by the parent or guardian of such student, except for the administration of epinephrine or naloxone for the purpose of emergency first aid as set forth in Sections D and E below.

Guardian means one who has the authority and obligations of guardianship of the person of a minor, and includes: (1) the obligation of care and control; and (2) the authority to make major decisions affecting the minor's welfare, including, but not limited to, consent determinations regarding marriage, enlistment in the armed forces and major medical, psychiatric or surgical treatment.

Intramural athletic events means tryouts, competition, practice, drills, and transportation to and from events that are within the bounds of a school district for the purpose of providing an opportunity for students to participate in physical activities and athletic contests that extend beyond the scope of the physical education program.

Interscholastic athletic events means events between or among schools for the purpose of providing an opportunity for students to participate in competitive contests that are highly organized and extend beyond the scope of intramural programs and includes tryouts, competition, practice, drills and transportation to and from such events.

Investigational drug means any medication with an approved investigational new drug (IND) application on file with the Food and Drug Administration (FDA), which is being scientifically tested and clinically evaluated to determine its efficacy, safety and side effects and which has not yet received FDA approval.

Licensed athletic trainer means a licensed athletic trainer employed by the school district pursuant to Chapter 375a of the Connecticut General Statutes.

Medication means any medicinal preparation, both prescription and non-prescription, including controlled drugs, as defined in Conn. Gen. Stat. Section 21a-240. This definition includes Aspirin, Ibuprofen or Aspirin substitutes containing Acetaminophen.

Medication emergency means a life-threatening reaction of a student to a medication.

Medication plan means a documented plan established by the school nurse in conjunction with the parent and student regarding the administration of medication in school. Such plan may be a stand-alone plan, part of an individualized health care plan, an emergency care plan or a medication administration form.

Medication order means the authorization by an authorized prescriber for the administration of medication to a student which shall include the name of the student, the name and generic name of the medication, the dosage of the medication, the route of administration, the time of administration, the frequency of administration, the indications for medication, any potential side effects including overdose or missed dose of the medication, the start and termination dates not to exceed a 12-month period, and the written signature of the prescriber.

Nurse means an advanced practice registered nurse, a registered nurse or a practical nurse licensed in Connecticut in accordance with Chapter 378, Conn. Gen. Stat.

Occupational therapist means an occupational therapist employed full time by the Board and licensed in Connecticut pursuant to Chapter 376a of the Connecticut General Statutes.

Optometrist means an optometrist licensed to provide optometry pursuant to Chapter 380 of the Connecticut General Statutes.

Paraeducator/Paraprofessional means a health care aide or assistant or an instructional aide or assistant employed by the Board who meets the requirements of the Board for employment as a health care aide or assistant or instructional aide or assistant.

Physical therapist means a physical therapist employed full time by the Board and licensed in Connecticut pursuant to Chapter 376 of the Connecticut General Statutes.

Physician means a doctor of medicine or osteopathy licensed to practice medicine in Connecticut pursuant to Chapter 370 of the Connecticut General Statutes, or licensed to practice medicine in another state.

Podiatrist means an individual licensed to practice podiatry in Connecticut pursuant to Chapter 375 of the Connecticut General Statutes.

Principal means the administrator in the school.

Research or study medications means FDA-approved medications being administered according to an approved study protocol. A copy of the study protocol shall be provided to the school nurse along with the name of the medication to be administered and the acceptable range of dose of such medication to be administered.

School means any educational facility or program which is under the jurisdiction of the Board excluding extracurricular activities.

School nurse means a nurse appointed in accordance with Conn. Gen. Stat. Section 10-212.

School nurse supervisor means the nurse designated by the Board as the supervisor or, if no designation has been made by the Board, the lead or coordinating nurse assigned by the Board.

School readiness program means a program that receives funds from the State Department of Education for a school readiness program pursuant to subsection (b) of Section 10-16p of the Connecticut General Statutes and exempt from licensure by the Office of Early Childhood pursuant to subdivision (1) of subsection (b) of Section 19a-77 of the Connecticut General Statutes.

Self-administration of medication means the control of the medication by the student at all times and is self-managed by the student according to the individual medication plan.

Teacher means a person employed full time by the Board who has met the minimum standards as established by the Board for performance as a teacher and has been approved by the school medical advisor and school nurse to be designated to administer medications pursuant to the Regulations of Connecticut State Agencies Sections 10-212a-1 through 10-212a-7.

**B. General Policies on Administration of Medications**

- (1) Except as provided below in Sections D and E, no medication, including non-prescription drugs, may be administered by any school personnel without:

- (a) the written medication order of an authorized prescriber;
  - (b) the written authorization of the student's parent or guardian or eligible student; and
  - (c) the written permission of a parent for the exchange of information between the prescriber and the school nurse necessary to ensure safe administration of such medication.
- (2) Prescribed medications shall be administered to and taken by only the person for whom the prescription has been written.
- (3) Except as provided in Sections D and E, medications may be administered only by a licensed nurse or, in the absence of a licensed nurse, by:
- (a) a full-time principal, a full-time teacher, or a full-time licensed physical or occupational therapist employed by the school district. A full-time principal, teacher, licensed physical or occupational therapist employed by the school district may administer oral, topical, intranasal or inhalant medications. Such individuals may administer injectable medications only to a student with a medically diagnosed allergic condition that may require prompt treatment to protect the student against serious harm or death.
  - (b) students with chronic medical conditions who are able to possess, self-administer, or possess and self-administer medication, provided all of the following conditions are met:
    - (i) an authorized prescriber provides a written medication order, including the recommendation for possession, self-administration, or possession and self-administration;
    - (ii) there is a written authorization for possession, self-administration, or possession and self-administration from the student's parent or guardian or eligible student;
    - (iii) the school nurse has developed a plan for possession, self-administration, or possession and self-administration, and general supervision, and has documented the plan in the student's cumulative health record;
    - (iv) the school nurse has assessed the student's competency for self-administration and deemed it safe and appropriate, including that the student: is capable of identifying and selecting the appropriate medication by size, color, amount or other label identification; knows the frequency

and time of day for which the medication is ordered; can identify the presenting symptoms that require medication; administers the medication appropriately; maintains safe control of the medication at all times; seeks adult supervision whenever warranted; and cooperates with the established medication plan;

- (v) the principal, appropriate teachers, coaches and other appropriate school personnel are informed the student is possessing, self-administering, or possessing and self-administering prescribed medication;
  - (vi) such medication is transported to school and maintained under the student's control in accordance with this policy; and
  - (vii) controlled drugs, as defined in this policy, may not be possessed or self-administered by students, except in extraordinary situations, such as international field trips, with approval of the school nurse supervisor and the school medical advisor in advance and development of an appropriate plan.
- (c) a student diagnosed with asthma who is able to self-administer medication shall be permitted to retain possession of an asthmatic inhaler at all times while attending school, in order to provide for prompt treatment to protect such student against serious harm or death, provided all of the following conditions are met:
- (i) an authorized prescriber provides a written order requiring the possession of an inhaler by the student at all times in order to provide for prompt treatment in order to protect the student against serious harm or death and authorizing the student's self-administration of medication, and such written order is provided to the school nurse;
  - (ii) there is a written authorization from the student's parent or guardian regarding the possession of an inhaler by the student at all times in order to protect the student against serious harm or death and authorizing the student's self-administration of medication, and such written authorization is provided to the school nurse;
  - (iii) the conditions set forth in subsection (b) above have been met, except that the school nurse's review of a student's

competency to self-administer an inhaler for asthma in the school setting shall not be used to prevent a student from retaining and self-administering an inhaler for asthma. Students may self-administer medication with only the written authorization of an authorized prescriber and written authorization from the student's parent or guardian or eligible student; and

- (iv) the conditions for self-administration meet any regulations as may be imposed by the State Board of Education in consultation with the Commissioner of Public Health.
- (d) a student diagnosed with an allergic condition who is able to self-administer medication shall be permitted to retain possession of a cartridge injector at all times while attending school, in order to provide for prompt treatment to protect such student against serious harm or death, provided all of the following conditions are met:
- (i) an authorized prescriber provides a written order requiring the possession of a cartridge injector by the student at all times in order to provide for prompt treatment in order to protect the student against serious harm or death and authorizing the student's possession, self-administration, or possession and self-administration of medication, and such written order is provided to the school nurse;
  - (ii) there is a written authorization from the student's parent or guardian regarding the possession of a cartridge injector by the student at all times in order to protect the student against serious harm or death and authorizing the student's possession, self-administration, or possession and self-administration of medication, and such written authorization is provided to the school nurse;
  - (iii) the conditions set forth in subsection (b) above have been met, except that the school nurse's review of a student's competency to self-administer cartridge injectors for medically-diagnosed allergies in the school setting shall not be used to prevent a student from retaining and self-administering a cartridge injector for medically-diagnosed allergies. Students may self-administer medication with only the written authorization of an authorized prescriber and written

authorization from the student's parent or guardian or eligible student; and

- (iv) the conditions for self-administration meet any regulations as may be imposed by the State Board of Education in consultation with the Commissioner of Public Health.
- (e) a student with a medically diagnosed life-threatening allergic condition may possess, self-administer, or possess and self-administer medication, including but not limited to medication administered with a cartridge injector, to protect the student against serious harm or death, provided the following conditions are met:
  - (i) the parent or guardian of the student has provided written authorization for the student to possess, self-administer, or possess and self-administer such medication; and
  - (ii) a qualified medical professional has provided a written order for the possession, self-administration, or possession and self-administration.
- (f) a coach of intramural or interscholastic athletic events or licensed athletic trainer who has been trained in the administration of medication, during intramural or interscholastic athletic events, may administer inhalant medications prescribed to treat respiratory conditions and/or medication administered with a cartridge injector for students with medically diagnosed allergic conditions which may require prompt treatment to protect the student against serious harm or death, provided all of the following conditions are met:
  - (i) the school nurse has determined that a self-administration plan is not viable;
  - (ii) the school nurse has provided to the coach a copy of the authorized prescriber's order and parental permission form;
  - (iii) the parent/guardian has provided the coach or licensed athletic trainer with the medication in accordance with Section K of this policy, and such medication is separate from the medication stored in the school health office for use during the school day; and

- (iv) the coach or licensed athletic trainer agrees to the administration of emergency medication and implements the emergency care plan, identified in Section H of this policy, when appropriate.
- (g) an identified school ~~paraeducator~~paraprofessional who has been trained in the administration of medication, provided medication is administered only to a specific student in order to protect that student from harm or death due to a medically diagnosed allergic condition, and the following additional conditions are met:
  - (i) there is written authorization from the student's parents/guardian to administer the medication in school;
  - (ii) medication is administered pursuant to the written order of (A) a physician licensed under chapter 370 of the Connecticut General Statutes, (B) an optometrist licensed to practice optometry under chapter 380 of the Connecticut General Statutes, (C) an advanced practice registered nurse licensed to prescribe in accordance with section 20-94a of the Connecticut General Statutes, or (D) a physician assistant licensed to prescribe in accordance with section 20-12d of the Connecticut General Statutes;
  - (iii) medication is administered only with approval by the school nurse and school medical advisor, if any, in conjunction with the school nurse supervisor and under the supervision of the school nurse;
  - (iv) the medication to be administered is limited to medications necessary for prompt treatment of an allergic reaction, including, but not limited to, a cartridge injector; and
  - (v) the ~~paraeducator~~paraprofessional shall have received proper training and supervision from the school nurse in accordance with this policy and state regulations.
- (h) a principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by the Board, coach or school ~~paraeducator~~paraprofessional, provided medication is antiepileptic medication, including by rectal syringe, administered only to a specific student with a medically diagnosed epileptic condition that requires prompt treatment in accordance with the student's individual seizure action plan, and the following additional conditions are met:

- (i) there is written authorization from the student's parents/guardians to administer the medication;
  - (ii) a written order for such administration has been received from the student's physician licensed under Chapter 370 of the Connecticut General Statutes;
  - (iii) the principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by the Board, coach or school paraprofessional is selected by the school nurse and school medical advisor, if any, and voluntarily agrees to administer the medication;
  - (iv) the principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by the Board, coach or school paraprofessional annually completes the training program established by the Connecticut State Department of Education and the Association of School Nurses of Connecticut, and the school nurse and medical advisor, if any, have attested, in writing, that such training has been completed; and
  - (v) the principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by the Board, coach or school ~~paraeducator~~paraprofessional receives monthly reviews by the school nurse to confirm competency to administer antiepileptic medication.
- (i) a director of a school readiness program or a before or after school program, or the director's designee, provided that the medication is administered:
    - (i) only to a student enrolled in such program; and
    - (ii) in accordance with Section L of this policy.
  - (j) a licensed practical nurse, after the school nurse has established the medication plan, provided that the licensed practical nurse may not train or delegate the administration of medication to another individual, and provided that the licensed practical nurse can demonstrate one of the following:
    - (i) training in administration of medications as part of their basic nursing program;

- (ii) successful completion of a pharmacology course and subsequent supervised experience; or
  - (iii) supervised experience in the administration of medication while employed in a health care facility.
- (4) Medications may also be administered by a parent or guardian to the parent or guardian's own child on school grounds.
- (5) Investigational drugs or research or study medications may be administered only by a licensed nurse. For FDA-approved medications being administered according to a study protocol, a copy of the study protocol shall be provided to the school nurse along with the name of the medication to be administered and the acceptable range of dose of such medication to be administered.

C. Diabetic Students

- (1) The Board permits blood glucose testing by students who have a written order from a physician or an advanced practice registered nurse stating the need and capability of such student to conduct self-testing, or the use of continuous blood glucose monitors (CGM) by students diagnosed with Type 1 diabetes, who have a written order from a physician or an advanced practice registered nurse.
- (2) The Board will not restrict the time or location of blood glucose testing by a student with diabetes on school grounds who has written authorization from a parent or guardian and a written order from a physician or an advanced practice registered nurse stating that such student is capable of conducting self-testing on school grounds.
- (3) The Board will not require a student using a continuous glucose monitor approved by the Food and Drug Administration for use without finger stick verification to undergo finger stick verification of blood glucose readings from a continuous glucose monitor on a routine basis. Finger stick testing of a student using a continuous glucose monitor so approved by the Food and Drug Administration shall only be conducted: (1) as ordered by the student's physician or advanced practice provider; (2) if it appears that the continuous glucose monitor is malfunctioning; or (3) in an urgent medical situation.
- (4) The Board shall purchase or use existing equipment owned by the Board to monitor blood glucose alerts transmitted from continuous glucose monitors of students with Type 1 diabetes to dedicated receivers, smartphone/tablet applications, or other appropriate technology on such equipment.

- (5) In the absence or unavailability of the school nurse, select school employees may administer medication with injectable equipment used to administer glucagon to a student with diabetes that may require prompt treatment in order to protect the student against serious harm or death, under the following conditions:
- (a) The student’s parent or guardian has provided written authorization;
  - (b) A written order for such administration has been received from the student’s physician licensed under Chapter 370 of the Connecticut General Statutes;
  - (c) The school employee is selected by either the school nurse or principal and is a principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by a school district, coach or school ~~pareaeducator~~paraprofessional;
  - (d) The school nurse shall provide general supervision to the selected school employee;
  - (e) The selected school employee annually completes any training required by the school nurse and school medical advisor in the administration of medication with injectable equipment used to administer glucagon;
  - (f) The school nurse and school medical advisor have attested in writing that the selected school employee completed the required training; and
  - (g) The selected school employee voluntarily agrees to serve as one who may administer medication with injectable equipment used to administer glucagon to a student with diabetes that may require prompt treatment in order to protect the student against serious harm or death.

D. Epinephrine for Purposes of Emergency First Aid Without Prior Authorization

- (1) For purposes of this Section D, “regular school hours” means the posted hours during which students are required to be in attendance at the individual school on any given day.
- (2) The school nurse shall maintain epinephrine in cartridge injectors for the purpose of emergency first aid to students who experience allergic reactions and do not have prior written authorization of a parent or

guardian or a prior written order of a qualified medical professional for the administration of epinephrine.

- (a) The school nurse, in consultation with the school nurse supervisor, shall determine the supply of epinephrine in cartridge injectors that shall be available in the individual school.
  - (b) In determining the appropriate supply of epinephrine in cartridge injectors, the nurse may consider, among other things, the number of students regularly in the school building during the regular school day and the size of the physical building.
- (3) The school nurse or school principal shall select principal(s), teacher(s), licensed athletic trainer(s), licensed physical or occupational therapist(s) employed by the Board, coach(es) and/or school ~~paraeducator~~ ~~paraprofessional~~(s) to maintain and administer the epinephrine in cartridge injectors for the purpose of emergency first aid as described in Paragraph (2) above, in the absence of the school nurse.
- (a) More than one individual must be selected by the school nurse or school principal for such maintenance and administration in the absence of the school nurse.
  - (b) The selected personnel, before conducting such administration, must annually complete the training made available by the Department of Education for the administration of epinephrine in cartridge injectors for the purpose of emergency first aid.
  - (c) The selected personnel must voluntarily agree to complete the training and administer epinephrine in cartridge injectors for the purpose of emergency first aid.
- (4) Either the school nurse or, in the absence of the school nurse, at least one of the selected and trained personnel as described in Paragraph (3) above shall be on the grounds of each school during regular school hours.
- (a) The school principal, in consultation with the school nurse supervisor, shall determine the level of nursing services and number of selected and trained personnel necessary to ensure that a nurse or selected and trained personnel is present on the grounds of each school during regular school hours.
  - (b) If the school nurse, or a substitute school nurse, is absent or must leave school grounds during regular school hours, the school nurse, school administrator or designee shall use an effective and

reasonable means of communication to notify one or more qualified school employees and other staff in the school that the selected and trained personnel identified in Paragraph (3) above shall be responsible for the emergency administration of epinephrine.

- (5) The administration of epinephrine pursuant to this section must be done in accordance with this policy, including but not limited to the requirements for documentation and record keeping, errors in medication, emergency medical procedures, and the handling, storage and disposal of medication, and the Regulations adopted by the Department of Education.
- (6) The parent or guardian of any student may submit, in writing, to the school nurse or school medical advisor, if any, that epinephrine shall not be administered to such student pursuant to this section.
  - (a) The school nurse shall notify selected and trained personnel of the students whose parents or guardians have refused emergency administration of epinephrine.
  - (b) The Board shall annually notify parents or guardians of the need to provide such written notice.
- (7) Following the emergency administration of epinephrine by selected and trained personnel as identified in this section:
  - (a) Such emergency administration shall be reported immediately to:
    - (i) The school nurse or school medical advisor, if any, by the personnel who administered the epinephrine; and
    - (ii) The student's parent or guardian, by the school nurse or personnel who administered the epinephrine.

- (b) A medication administration record shall be:
- (i) Submitted to the school nurse by the personnel who administered the epinephrine as soon as possible, but no later than the next school day; and
  - (ii) filed in or summarized on the student's cumulative health record, in accordance with the Document and Record Keeping section of this policy.

~~*[Optional insert for boards of education wishing to make opioid antagonists (e.g., naloxone hydrochloride or "Narcan") available in their schools. Naloxone is a controlled medication that is used as an emergency first aid measure in the event of an opioid overdose. Boards of education are not required to make opioid antagonists available in their schools, nor are they required to maintain a secure box or vending machine containing opioid antagonists on their premises (as outlined in subsections E(8) and E(9), below). However, Connecticut General Statutes § 10-212a authorizes school nurses or, in their absence, qualified school employees, to maintain and administer opioid antagonists, on an emergency basis, to students experiencing opioid-related drug overdoses without prior written authorization, provided certain requirements are met.]*~~

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~~*If a board of education chooses not to include Section E, all references to Sections E-M should be revised accordingly.*~~

## ADMINISTERING MEDICATION TO PREVENT OPIOID OVERDOSE

### Students

#### Administering Medication Opioid Overdose Prevention (Emergency Administration of Opioid Antagonist)

The Weston Board of Education (Board) is committed to enhancing the health and safety of individuals within the school environment. The District will identify specific locations for the storage of Naloxone and protocols for its administration in emergency situations to assist individuals suspected to be experiencing an opioid overdose during school hours.

#### E. Opioid Antagonists for Purposes of Emergency First Aid Without Prior Authorization

- (1) For purposes of this Section E, "regular school hours" means the posted hours during which students are required to be in attendance at the individual school on any given day. "Regular school hours" does not

include after-school events such as athletics or extracurricular activities that take place outside the posted hours.

- (2) For purposes of this section, an “opioid antagonist” means naloxone hydrochloride (e.g., Narcan) or any other similarly acting and equally safe drug that the FDA has approved for the treatment of a drug overdose.
- (3) In accordance with Connecticut law and this policy, a school nurse may maintain opioid antagonists for the purpose of administering emergency first aid to students who experience a known or suspected opioid overdose and do not have a prior written authorization of a parent or guardian or a prior written order of a qualified medical professional for the administration of such opioid antagonist.
  - (a) The school nurse, in consultation with the Board’s medical advisor, shall determine the supply of opioid antagonists that shall be maintained in the individual school.
  - (b) In determining the appropriate supply of opioid antagonists, the nurse may consider, among other things, the number of students regularly in the school building during the regular school day and the size of the physical building.
  - (c) The school nurse shall be responsible for the safe storage of opioid antagonists maintained in a school and shall ensure any supply of opioid antagonists maintained is stored in a secure manner, in accordance with the manufacturer’s instructions, and in a location where it can be obtained in a timely manner if administration is necessary.
  - (d) The school nurse shall be responsible for maintaining an inventory of opioid antagonists maintained in the school, tracking the date(s) of expiration of the supply of opioid antagonists maintained in a school, and, as appropriate, refreshing the supply of opioid antagonists maintained in the school.
- (4) The school nurse, in consultation with the Superintendent and the building principal, shall provide notice to parents and guardians of the Board’s policies and procedures regarding the emergency administration of opioid antagonists in the event of a known or suspected opioid overdose.
- (5) A school nurse shall be approved to administer opioid antagonists for the purpose of emergency first aid, as described in Paragraph (3) above, in the event of a known or suspected opioid overdose, in accordance with

this policy and provided that such nurse has completed a training program in the distribution and administration of an opioid antagonist (1) developed by the State Department of Education, Department of Consumer Protection, and Department of Public Health, or (2) under a local agreement, entered into by the Board on July 1, 2022 or thereafter, with a prescriber or pharmacist for the administration of opioid antagonists for the purpose of emergency first aid, which training shall also address the Board's opioid antagonist storage, handling, labeling, recalls, and record keeping.

- (6) The school nurse or school principal shall select principal(s), teacher(s), licensed athletic trainer(s), coach(es), school ~~pareducator~~paraprofessional(s), and/or licensed physical or occupational therapist(s) employed by the Board to maintain and administer the opioid antagonists for the purpose of emergency first aid as described in Paragraph (3) above, in the absence of the school nurse.
  - (a) More than one individual must be selected by the school nurse or school principal for such maintenance and administration in the absence of the school nurse.
  - (b) The selected personnel, before administering an opioid antagonist pursuant to this section, must complete a training program in the distribution and administration of an opioid antagonist (1) developed by the State Department of Education, Department of Consumer Protection, and Department of Public Health, or (2) under a local agreement, entered into by the Board on July 1, 2022 or thereafter, with a prescriber or pharmacist for the administration of opioid antagonists for the purpose of emergency first aid, which training shall also address the Board's opioid antagonist storage, handling, labeling, recalls, and record keeping.
  - (c) All school personnel shall be notified of the identity of qualified school employees authorized to administer an opioid antagonist in the absence of the school nurse.
- (7) Either the school nurse or, in the absence of the school nurse, at least one of the selected and trained personnel as described in Paragraph (6) above, shall be on the grounds of each school during regular school hours.
  - (a) The school principal, in consultation with the school nurse supervisor, shall determine the level of nursing services and number of selected and trained personnel necessary to ensure that a nurse or selected and trained personnel is present on the grounds of each school during regular school hours.

- (b) If the school nurse, or a substitute school nurse, is absent or must leave school grounds during regular school hours, the school nurse, school administrator or designee shall use an effective and reasonable means of communication to notify one or more qualified school employees and other staff in the school that the selected and trained personnel identified in Paragraph (6) above shall be responsible for the emergency administration of opioid antagonists.
- (c) If a Board employee becomes aware of a student experiencing a known or suspected opioid overdose on school grounds but outside of regular school hours and opioid antagonists and/or the school nurse or other qualified school employee is not available to administer opioid antagonists for the purpose of emergency first aid, the Board employee will call 9-1-1.

~~NOTE TO CLIENT: Even if the Board authorizes the use of opioid antagonists, as described above, the following sections E(8) and E(9) are OPTIONAL. If the board chooses not to adopt E(8) and E(9), then all references to E(10) E(13) should be renumbered accordingly.~~

- (8) The District may also maintain intranasally or orally administered opioid antagonists in a secure box, pursuant to an agreement with a prescriber or pharmacist that permits the District to install on the District's premises a secure box. For the purposes of this section, a "secure box" means a container that (A) is securely affixed in a public location, (B) can be accessed by individuals for public use, (C) is temperature controlled or stored in an environment with temperature controls, (D) is tamper-resistant, (E) is equipped with an alarm capable of detecting and transmitting a signal when accessed by individuals, and (F) is equipped with an alarm capable of alerting first responders when accessed by individuals, unless equipping the container with such an alarm is commercially impracticable. Such agreement shall address the environmental controls necessary to store such opioid antagonist, establish procedures for replenishment of such opioid antagonist, and establish a process for monitoring the expiration dates of such opioid antagonist and disposing of any expired opioid antagonist. The secure box shall not contain an opioid antagonist in an amount greater than the amount necessary to serve the community in which it is installed. The secure box may also contain an automatic external defibrillator or other products used to treat a medical emergency. The District shall post signage disclosing the presence of such opioid antagonists and usage directions for such opioid antagonist, in the language or languages spoken in the community in which the secure box is installed. If the District is unable to maintain the secure box, or the supplies necessary to

maintain the secure box are unavailable, the District shall remove such secure box, and all signs required under this policy concerning such secure box, as soon as practicable but in no event later than five days after the District discovers that it is unable to maintain such secure box or the supplies necessary to maintain such secure box.

- (9) The District may also maintain, pursuant to an agreement with a prescriber or pharmacist that permits the District to operate a vending machine for the distribution of intranasally administered opioid antagonists, a vending machine for such purposes. The vending machine shall either be kept at a location that maintains a temperature that is at all times consistent with the manufacturer's package insert or has the ability to maintain an environment, independent of the external environment, that is appropriate for the opioid antagonist, in accordance with manufacturer's package insert. The District shall display, clearly and conspicuously, on the outside of or adjacent to the vending machine or upon the distribution of the opioid antagonist:
  - (a) Information concerning the signs and symptoms of an overdose;
  - (b) Instructions for the use of the opioid antagonist;
  - (c) Information about the services that are offered in Connecticut to treat opioid use disorder; and
  - (d) an Internet web site address that contains, or a quick response (QR) code that directs an individual to an Internet web site that contains, information concerning the signs and symptoms of an overdose, overdose response and instructions for the use of the opioid antagonist.
- (10) The administration and storage of opioid antagonists pursuant to this policy must be effected in accordance with this policy and procedures regarding the acquisition, maintenance, and administration established by the Superintendent in consultation with the Board's medical advisor.
- (11) The parent or guardian of any student may submit, in writing, to the school nurse or school medical advisor, if any, that opioid antagonists shall not be administered to such student pursuant to this section.
  - (a) The school nurse shall notify selected and trained personnel of the students whose parents or guardians have refused emergency administration of opioid antagonists.

- (b) The Board shall annually notify parents or guardians of the need to provide such written notice of refusal.
- (12) Following the emergency administration of an opioid antagonist by a school nurse or selected and trained personnel as identified in this section:
- (a) Immediately following the emergency administration of an opioid antagonist by a school nurse or selected and trained personnel as identified in this section, the person administering the opioid antagonist must call 911.
  - (b) Such emergency administration shall be reported immediately to:
    - (i) The school nurse or school medical advisor, if any, by the personnel who administered the opioid antagonist;
    - (ii) The Superintendent of Schools; and
    - (iii) The student's parent or guardian.
  - (c) A medication administration record shall be:
    - (i) Created by the school nurse or submitted to the school nurse by the personnel who administered the opioid antagonist, as soon as possible, but no later than the next school day; and
    - (ii) filed in or summarized on the student's cumulative health record, in accordance with Section F of this policy.
- (13) In the event that any provisions of this Section E conflict with regulations adopted by the Connecticut State Department of Education concerning the use, storage and administration of opioid antagonists in schools, the Department's regulations shall control.†

F. Documentation and Record Keeping

- (1) Each school or before or after school program and school readiness program where medications are administered shall maintain an individual medication administration record for each student who receives medication during school or program hours. This record shall include the following information:
- (a) the name of the student;
  - (b) the student's state-assigned student identifier (SASID);

- (c) the name of the medication;
  - (d) the dosage of the medication;
  - (e) the route of the administration, (e.g., oral, topical, inhalant, etc.);
  - (f) the frequency of administration;
  - (g) the name of the authorized prescriber;
  - (h) the dates for initiating and terminating the administration of medication, including extended-year programs;
  - (i) the quantity received at school and verification by the adult delivering the medication of the quantity received;
  - (j) the date the medication is to be reordered (if any);
  - (k) any student allergies to food and/or medication(s);
  - (l) the date and time of each administration or omission, including the reason for any omission;
  - (m) the dose or amount of each medication administered;
  - (n) the full written or electronic legal signature of the nurse or other authorized school personnel administering the medication; and
  - (o) for controlled medications, a medication count which should be conducted and documented at least once a week and co-signed by the assigned nurse and a witness.
- (2) All records are either to be made in ink and shall not be altered, or recorded electronically in a record that cannot be altered.
- (3) Written orders of authorized prescribers, written authorizations of a parent or guardian, the written parental permission for the exchange of information by the prescriber and school nurse to ensure safe administration of such medication, and the completed medication administration record for each student shall be filed in the student's cumulative health record or, for before or after school programs and school readiness programs, in the student's program record.
- (4) Authorized prescribers may make verbal orders, including telephone orders, for a *change* in medication order. Such verbal orders may be received only by a school nurse and must be followed by a written order, which may be faxed, and must be received within three (3) school days.
- (5) Medication administration records will be made available to the Department of Education for review until destroyed pursuant to Section 11-8a and Section 10-212a(b) of the Connecticut General Statutes.
- (a) The completed medication administration record for non-controlled medications may, at the discretion of the school district, be destroyed in accordance with Section M8 of the Connecticut Record Retention Schedules for Municipalities upon receipt of a signed approval form (RC-075) from the Office of the

Public Records Administrator, so long as such record is superseded by a summary on the student health record.

- (b) The completed medication administration record for controlled medications shall be maintained in the same manner as the non-controlled medications. In addition, a separate medication administration record needs to be maintained in the school for three (3) years pursuant to Section 10-212a(b) of the Connecticut General Statutes.
- (6) Documentation of any administration of medication by a coach or licensed athletic trainer shall be completed on forms provided by the school and the following procedures shall be followed:
- (a) a medication administration record for each student shall be maintained in the athletic offices;
  - (b) administration of a cartridge injector medication shall be reported to the school nurse at the earliest possible time, but no later than the next school day;
  - (c) all instances of medication administration, except for the administration of cartridge injector medication, shall be reported to the school nurse at least monthly, or as frequently as required by the individual student plan; and
  - (d) the administration of medication record must be submitted to the school nurse at the end of each sport season and filed in the student's cumulative health record.

G. Errors in Medication Administration

- (1) Whenever any error in medication administration occurs, the following procedures shall apply:
- (a) the person making the error in medication administration shall immediately implement the medication emergency procedures in this policy if necessary;
  - (b) the person making the error in medication administration shall in all cases immediately notify the school nurse, principal, school nurse supervisor, and authorized prescriber. The person making the error, in conjunction with the principal, shall also immediately notify the parent or guardian, advising of the nature of the error and all steps taken or being taken to rectify the error,

including contact with the authorized prescriber and/or any other medical action(s); and

- (c) the principal shall notify the Superintendent or the Superintendent's designee.
- (2) The school nurse, along with the person making the error, shall complete a report using the authorized medication error report form. The report shall include any corrective action taken.
- (3) Any error in the administration of medication shall be documented in the student's cumulative health record or, for before or after school programs and school readiness programs, in the student's program record.
- (4) These same procedures shall apply to coaches and licensed athletic trainers during intramural and interscholastic events, except that if the school nurse is not available, a report must be submitted by the coach or licensed athletic trainer to the school nurse the next school day.

#### H. Medication Emergency Procedures

- (1) Whenever a student has a life-threatening reaction to administration of a medication, resolution of the reaction to protect the student's health and safety shall be the foremost priority. The school nurse and the authorized prescriber shall be notified immediately, or as soon as possible in light of any emergency medical care that must be given to the student.
- (2) Emergency medical care to resolve a medication emergency includes but is not limited to the following, as appropriate under the circumstances:
  - (a) use of the 911 emergency response system;
  - (b) application by properly trained and/or certified personnel of appropriate emergency medical care techniques, such as cardio-pulmonary resuscitation;
  - (c) administration of emergency medication in accordance with this policy;
  - (d) contact with a poison control center; and
  - (e) transporting the student to the nearest available emergency medical care facility that is capable of responding to a medication emergency.
- (3) As soon as possible, in light of the circumstances, the principal shall be notified of the medication emergency. The principal shall immediately thereafter contact the Superintendent or the Superintendent's designee,

who shall thereafter notify the parent or guardian, advising of the existence and nature of the medication emergency and all steps taken or being taken to resolve the emergency and protect the health and safety of the student, including contact with the authorized prescriber and/or any other medical action(s) that are being or have been taken.

I. Supervision

- (1) The school nurse is responsible for general supervision of administration of medications in the school(s) to which that nurse is assigned.
- (2) The school nurse's duty of general supervision includes, but is not limited to, the following:
  - (a) availability on a regularly scheduled basis to:
    - (i) review orders or changes in orders and communicate these to personnel designated to give medication for appropriate follow-up;
    - (ii) set up a plan and schedule to ensure medications are given properly;
    - (iii) provide training to licensed nursing personnel, full-time principals, full-time teachers, full-time licensed physical or occupational therapists employed by the school district, coaches of intramural and interscholastic athletics, licensed athletic trainers and identified ~~paraeducators~~ ~~paraprofessionals~~ designated in accordance with Section B(3)(g), above, which training shall pertain to the administration of medications to students, and assess the competency of these individuals to administer medication;
    - (iv) support and assist other licensed nursing personnel, full-time principals, full-time teachers, full-time licensed physical or occupational therapists employed by the school district, coaches of intramural and/or interscholastic athletics, licensed athletic trainers and identified ~~paraeducators~~ ~~paraprofessionals~~ designated in accordance with Section B(3)(g), above, to prepare for and implement their responsibilities related to the administration of specific medications during school hours and during intramural and interscholastic athletics as provided by this policy;

- (v) provide appropriate follow-up to ensure the administration of medication plan results in desired student outcomes, including providing proper notification to appropriate employees or contractors regarding the contents of such medical plans; and
  - (vi) provide consultation by telephone or other means of telecommunications, which consultation may be provided by an authorized prescriber or other nurse in the absence of the school nurse.
- (b) In addition, the school nurse shall be responsible for:
- (i) implementing policies and procedures regarding the receipt, storage, and administration of medications;
  - (ii) reviewing, on a periodic basis, all documentation pertaining to the administration of medications for students;
  - (iii) performing observations of the competency of medication administration by full-time principals, full-time teachers, full-time licensed physical or occupational therapists employed by the school district, coaches of intramural and/or interscholastic athletics and licensed athletic trainers in accordance with Section B(3)(f), above, and identified ~~paraeducators~~ ~~paraprofessionals~~ designated in accordance with Section B(3)(g), above, who have been newly trained to administer medications; and,
  - (iv) conducting periodic reviews, as needed, with licensed nursing personnel, full-time principals, full-time teachers, full-time licensed physical or occupational therapists employed by the school district, coaches of intramural and/or interscholastic athletics and licensed athletic trainers in accordance with Section B(3)(f), above, and identified ~~paraeducators~~ ~~paraprofessionals~~ designated in accordance with Section B(3)(g), above, regarding the needs of any student receiving medication.

J. Training of School Personnel

- (1) Full-time principals, full-time teachers, full-time licensed physical or occupational therapists employed by the school district, coaches of intramural and/or interscholastic athletics and licensed athletic trainers in accordance with Section B(3)(f), above, and identified

~~paraeducators~~~~paraprofessionals~~ designated in accordance with Section B(3)(g), above, who are designated to administer medications shall at least annually receive training in their safe administration, and only trained full-time principals, full-time teachers, full-time licensed physical or occupational therapists employed by the school district, coaches of intramural and/or interscholastic athletics and licensed athletic trainers in accordance with Section B(3)(f), above, and identified ~~paraeducators~~~~paraprofessionals~~ designated in accordance with Section B(3)(g), above, shall be allowed to administer medications.

- (2) Training for full-time principals, full-time teachers, full-time licensed physical or occupational therapists employed by the school district, coaches of intramural and/or interscholastic athletics and licensed athletic trainers in accordance with Section B(3)(f), above, and identified ~~paraeducators~~~~paraprofessionals~~ designated in accordance with Section B(3)(g), above, shall include, but is not necessarily limited to, the following:
  - (a) the general principles of safe administration of medication;
  - (b) the procedures for administration of medications, including the safe handling and storage of medications, and the required record-keeping; and
  - (c) specific information related to each student's medication plan, including the name and generic name of the medication, indications for medication dosage, routes, time and frequency of administration, therapeutic effects of the medication, potential side effects, overdose or missed doses of the medication, and when to implement emergency interventions.
- (3) The principal(s), teacher(s), licensed athletic trainer(s), licensed physical or occupational therapist(s) employed by the Board, coach(es) and/or school ~~paraeducators~~~~paraprofessional~~(s) who administer epinephrine as emergency first aid, pursuant to Section D above, shall annually complete the training program developed by the Departments of Education and Public Health and training in cardiopulmonary resuscitation and first aid.

~~*Local and regional boards of education that include Section E, above, should also include the following language.*~~

- (4) The principal(s), teacher(s), licensed athletic trainer(s), licensed physical or occupational therapist(s), coach(es) and/or school ~~paraeducator~~~~paraprofessional~~(s) who administer opioid antagonists as emergency first aid, pursuant to Section E above, shall annually

complete a training program in the distribution and administration of an opioid antagonist (1) developed by the State Department of Education, Department of Consumer Protection, and Department of Public Health, or (2) under a local agreement, entered into by the Board on July 1, 2022 or thereafter, with a prescriber or pharmacist for the administration of opioid antagonists for the purpose of emergency first aid, which training shall also address the Board's opioid antagonist storage, handling, labeling, recalls, and record keeping.

- (5) The Board shall maintain documentation of medication administration training as follows:
- (a) dates of general and student-specific trainings;
  - (b) content of the trainings;
  - (c) individuals who have successfully completed general and student-specific administration of medication training for the current school year; and
  - (d) names and credentials of the nurse or school medical advisor, if any, trainer or trainers.
- (6) Licensed practical nurses may not conduct training in the administration of medication to another individual.

~~Local and regional boards of education that employ their own bus drivers should include the following language.~~

~~(7) Bus Drivers.~~

~~(a) Not later than June 30, 2019, the Board shall provide training to all of its school bus drivers, which training may be completed using an online module, on topics including, but not limited to, the following:~~

~~(i) the identification of the signs and symptoms of anaphylaxis;~~

~~(ii) the administration of epinephrine by a cartridge injector;~~

~~(iii) the notification of emergency personnel; and~~

~~(iv) the reporting of an incident involving a student and a life-threatening allergic reaction.~~

~~(b) On and after July 1, 2019, the Board shall provide the training described in subsections J(6)(a), above as follows:~~

~~¶  
(i) In the case of a school bus driver who is employed by the Board, such training shall be provided to such school bus driver following the issuance or renewal of a public passenger endorsement to operate a school bus pursuant to Conn. Gen. Stat. 14-44(a), to such school bus driver; and~~

~~(ii) In the case of a school bus driver who is not employed by the Board at the time when such endorsement is issued or renewed to such school bus driver, upon the hiring of such school bus driver by the Board, except the Board is not required to provide such training to any school bus driver who has previously received such training following the most recent issuance or renewal of such endorsement to such school bus driver.¶~~

~~¶  
(c) In the event that the Board employs school bus drivers, the Board will comply with all documentation and record-keeping requirements required by law.]~~

K. Handling, Storage and Disposal of Medications

- (1) All medications, except those approved for transporting by students for self-medication, those administered by coaches of intramural or interscholastic athletics or licensed athletic trainers in accordance with Section B(3)(f) above, and epinephrine ~~[if applicable: or naloxone]~~ to be used for emergency first aid in accordance with Sections D ~~[if applicable: and E]~~ above, must be delivered by the parent, guardian, or other responsible adult to the nurse assigned to the student's school or, in the absence of such nurse, the school principal who has been trained in the appropriate administration of medication. Medications administered by coaches of intramural or interscholastic athletics or licensed athletic trainers must be delivered by the parent or guardian directly to the coach or licensed athletic trainer in accordance with Section B(3)(f) above.
- (2) The nurse shall examine on-site any new medication, medication order and the required authorization to administer form, and, except for epinephrine and naloxone to be used as emergency first aid in accordance with Sections D ~~[if applicable: and E]~~ above, shall develop a medication administration plan for the student before any medication is given to the student by any school personnel. No medication shall be stored at a school without a current written order from an authorized prescriber.
- (3) The school nurse shall review all medication refills with the medication order and parent authorization prior to the administration of medication, except for epinephrine ~~[if applicable: and naloxone]~~ intended for

emergency first aid in accordance with Sections D ~~if applicable:~~ and E/ above.

- (4) Emergency Medications
  - (a) Except as otherwise determined by a student's emergency care plan, emergency medications shall be stored in an unlocked, clearly labeled and readily accessible cabinet or container in the health room during school hours under the general supervision of the school nurse or, in the absence of the school nurse, the principal or the principal's designee who has been trained in the administration of medication.
  - (b) Emergency medication shall be locked beyond the regular school day or program hours, except as otherwise determined by a student's emergency care plan.
- (5) All medications, except those approved for keeping by students for self-medication, shall be kept in a designated and locked location used exclusively for the storage of medication. Controlled substances shall be stored separately from other drugs and substances in a separate, secure, substantially constructed, locked metal or wood cabinet.
- (6) Access to stored medications shall be limited to persons authorized to administer medications. Each school or before or after school program and school readiness program shall maintain a current list of such authorized persons.
- (7) All medications, prescription and non-prescription, shall be delivered and stored in their original containers and in such a manner that renders them safe and effective.
- (8) At least two sets of keys for the medication containers or cabinets shall be maintained for each school building or before or after school program and school readiness program. One set of keys shall be maintained under the direct control of the school nurse or nurses and an additional set shall be under the direct control of the principal and, if necessary, the program director or lead teacher who has been trained in the general principles of the administration of medication shall also have a set of keys.
- (9) Medications that must be refrigerated shall be stored in a refrigerator at no less than 36 degrees Fahrenheit and no more than 46 degrees Fahrenheit. The refrigerator must be located in the health office that is maintained for health services with limited access. Non-controlled medications may be stored directly on the refrigerator shelf with no

further protection needed. Controlled medication shall be stored in a locked box that is affixed to the refrigerator shelf.

- (10) All unused, discontinued or obsolete medications shall be removed from storage areas and either returned to the parent or guardian or, if the medication cannot be returned to the parent or guardian, the medication shall be destroyed in collaboration with the school nurse:
  - (a) non-controlled drugs shall be destroyed in the presence of at least one witness;
  - (b) controlled drugs shall be destroyed in pursuant to Section 21a-262-3 of the Regulations of Connecticut State Agencies; and
  - (c) accidental destruction or loss of controlled drugs must be verified in the presence of a second person, including confirmation of the presence or absence of residue, and jointly documented on the student medication administration record and on a medication error form pursuant to Section 10-212a(b) of the Connecticut General Statutes. If no residue is present, notification must be made to the Department of Consumer Protection pursuant to Section 21a-262-3 of the Regulations of Connecticut State Agencies.
  
- (11) Medications to be administered by coaches of intramural or interscholastic athletic events or licensed athletic trainers shall be stored:
  - (a) in containers for the exclusive use of holding medications;
  - (b) in locations that preserve the integrity of the medication;
  - (c) under the general supervision of the coach or licensed athletic trainer trained in the administration of medication; and
  - (d) in a locked secured cabinet when not under the general supervision of the coach or licensed athletic trainer during intramural or interscholastic athletic events.
  
- (12) In no event shall a school store more than a three (3) month supply of a medication for a student.

L. School Readiness Programs and Before or After School Programs

- (1) As determined by the school medical advisor, if any, and school nurse supervisor, the following procedures shall apply to the administration of medication during school readiness programs and before or after school

programs run by the Board, which are exempt from licensure by the Office of Early Childhood:

- (a) Administration of medication at these programs shall be provided only when it is medically necessary for participants to access the program and maintain their health status while attending the program.
- (b) Except as provided by Sections D ~~if applicable:~~ and E] above, no medication shall be administered in these programs without:
  - (i) the written order of an authorized prescriber; and
  - (ii) the written authorization of a parent or guardian or an eligible student.
- (c) A school nurse shall provide consultation to the program director, lead teacher or school administrator who has been trained in the administration of medication regarding the safe administration of medication within these programs. The school medical advisor and school nurse supervisor shall determine whether, based on the population of the school readiness program and/or before or after school program, additional nursing services are required for these programs.
- (d) Only school nurses, directors or directors' designees, lead teachers or school administrators who have been properly trained may administer medications to students as delegated by the school nurse or other registered nurse. Properly trained directors or directors' designees, lead teachers or school administrators may administer oral, topical, intranasal or inhalant medications. Investigational drugs or research or study medications may not be administered in these programs.
- (e) Students attending these programs may be permitted to self-medicate only in accordance with the provisions of Section B(3) of this policy. In such a case, the school nurse must provide the program director, lead teacher or school administrator running the program with the medication order and parent permission for self-administration.
- (f) In the absence of the school nurse during program administration, the program director, lead teacher or school administrator is responsible for decision-making regarding medication administration.

- (g) Cartridge injector medications may be administered by a director, lead teacher or school administrator only to a student with a medically-diagnosed allergic condition which may require prompt treatment to protect the student against serious harm or death.
- (2) Local poison control center information shall be readily available at these programs.
- (3) Procedures for medication emergencies or medication errors, as outlined in this policy, must be followed, except that in the event of a medication error a report must be submitted by the program director, lead teacher or school administrator to the school nurse the next school day.
- (4) Training for directors or directors' designees, lead teachers or school administrators in the administration of medication shall be provided in accordance with Section J of this policy.
- (5) All medications must be handled and stored in accordance with Section K of this policy. Where possible, a separate supply of medication shall be stored at the site of the before or after or school readiness program. In the event that it is not possible for the parent or guardian to provide a separate supply of medication, then a plan shall be in place to ensure the timely transfer of the medication from the school to the program and back on a daily basis.
- (6) Documentation of any administration of medication shall be completed on forms provided by the school and the following procedures shall be followed:
  - (a) a medication administration record for each student shall be maintained by the program;
  - (b) administration of a cartridge injector medication shall be reported to the school nurse at the earliest possible time, but no later than the next school day;
  - (c) all instances of medication administration, except for the administration of cartridge injector medication, shall be reported to the school nurse at least monthly, or as frequently as required by the individual student plan; and
  - (d) the administration of medication record must be submitted to the school nurse at the end of each school year and filed in the student's cumulative health record.

- (7) The procedures for the administration of medication at school readiness programs and before or after school programs shall be reviewed annually by the school medical advisor, if any, and school nurse supervisor.

M. Review and Revision of Policy

In accordance with the provisions of Conn. Gen. Stat. Section 10-212a(a)(2) and Section 10-212a-2 of the Regulations of Connecticut State Agencies, the Board shall review this policy periodically, and at least biennially, with the advice and approval of the school medical advisor, if any, or other qualified licensed physician, and the school nurse supervisor. Any proposed revisions to the policy must be made with the advice and approval of the school medical advisor, school nurse supervisor or other qualified licensed physician.

Legal References:

Connecticut General Statutes:

Public Act No. 23-52, “An Act Concerning The Department of Consumer Protections Recommendations Regarding Prescription Drug Regulation”  
Section 10-206  
Section 10-212  
Section 10-212a  
Section 10-212c  
Section 10-220j  
Section 14-276b  
Section 19a-900  
Section 21a-240  
Section 21a-286  
Section 52-557b

Regulations of Conn. State Agencies:

Sections 10-212a-1 through 10-212a-10, inclusive

Memorandum of Decision, In Re: Declaratory Ruling/Delegation by Licensed Nurses to Unlicensed Assistive Personnel, Connecticut State Board of Examiners for Nursing (April 5, 1995)

Storage and Administration of Opioid Antagonists in Schools: Guidelines for Local and Regional Boards of Education, Connecticut State Department of Education (October 1, 2022)

ADOPTED: \_\_\_\_\_

REVISED: \_\_\_\_\_

9/27/2023



~~[NOTE: This form makes reference to a school medical advisor. If your district does not, and is not required to, have a medical advisor, all references to such should be deleted before providing this form to parents.]~~

**[Board of Education/School Letterhead]**  
**REFUSAL TO PERMIT ADMINISTRATION**  
**OF EPINEPHRINE FOR EMERGENCY FIRST AID**

Name of Student: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address of Student:  
\_\_\_\_\_

Name of Parent(s): \_\_\_\_\_

Address of Parent(s): \_\_\_\_\_  
(if different from child)

Connecticut law requires the school nurse and other qualified school personnel in all public schools to maintain epinephrine in cartridge injectors (EpiPens) for the purpose of administering emergency first aid to students who experience allergic reactions and do not have a prior written authorization of a parent or guardian or a prior written order of a qualified medical professional for the administration of epinephrine. State law permits the parent or guardian of a student to submit a written directive to the **school nurse or school medical advisor** that epinephrine shall not be administered to such student in emergency situations. **This form is provided for those parents who refuse to have epinephrine administered to their child.** The refusal is valid for only for the 20\_\_-20\_\_ school year.

I, \_\_\_\_\_, the parent/guardian of \_\_\_\_\_,  
Print name of parent/guardian Print name of student  
refuse to permit the administration of epinephrine to the above named student for purposes of emergency first aid in the case of an allergic reaction.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

**Please return the completed original form to your child's school nurse. ~~or school medical advisor,~~**  
~~\_\_\_\_\_ [Insert name of medical advisor] at~~  
~~\_\_\_\_\_ [Insert address of medical~~  
~~advisor].~~

9/27/2023



~~[NOTE: This form makes reference to a school medical advisor. If your district does not, and is not required to, have a medical advisor, all references to such should be deleted before providing this form to parents.]~~

**[Board of Education/School Letterhead]**  
**REFUSAL TO PERMIT ADMINISTRATION**  
**OF OPIOID ANTAGONISTS FOR EMERGENCY FIRST AID**

Name of Student: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address of Student:  
\_\_\_\_\_

Name of Parent(s): \_\_\_\_\_

Address of Parent(s): \_\_\_\_\_  
(if different from child)

Connecticut law authorizes the school nurse and other qualified school personnel in all public schools to maintain opioid antagonists (Narcan) for the purpose of administering emergency first aid to students who experience an opioid-related drug overdose and do not have a prior written authorization of a parent or guardian or a prior written order of a qualified medical professional for the administration of opioid antagonists. State law permits the parent or guardian of a student to submit a written directive to the **school nurse or school medical advisor** that opioid antagonists shall not be administered to such student in emergency situations. **This form is provided for those parents who refuse to have opioid antagonists administered to their child.** The refusal is valid for only for the 20\_\_-20\_\_ school year.

I, \_\_\_\_\_, the parent/guardian of \_\_\_\_\_,  
Print name of parent/guardian Print name of student

refuse to permit the administration of opioid antagonists to the above named student for purposes of emergency first aid in the case of an opioid-related drug overdose.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

**Please return the completed original form to your child's school nurse ~~or school medical advisor,~~**  
~~\_\_\_\_\_ [Insert name of medical advisor] at~~

~~\_\_\_\_\_ [Insert address of medical~~  
~~advisor].~~

9/27/2023

Ages of Attendance

According to Connecticut General Statutes 10-186 the board of education shall provide education for all persons five years of age over and **to the end of the school year to age twenty-two** older and under twenty-one years of age who have not graduated from a high school or vocational school, except as provided in Connecticut General Statutes 10-233c and 10-233d. According to Connecticut General Statute 10-76d(b2) special education will be provided for children who have not attained school age who have been identified as being in need of special education, and whose educational potential will be irreparably diminished without special education.

ADMISSION PROCESS OVER AGE FIVE

Parents and those who have the control of children five years of age and over and under eighteen years of age, are obligated by Connecticut law to require their children to attend public day school or its equivalent in the district in which such child resides, unless such child is a high school graduate or the parent or person having control of such child is able to show that the child is elsewhere receiving equivalent instruction in the studies taught in the public schools. Students under age eighteen are subject to mandatory attendance laws unless they are at least seventeen and their parent/guardian, or other person having control of the child, consents to such child's removal from school. The parent or person shall exercise this option by personally appearing at the school district office to sign a withdrawal form. Such withdrawal form shall include an attestation from a school counselor, or school administrator of the school that this district has provided the parent or person with information on the educational opportunities options available in the school system and in the community.

The parent or person having control of a child five years of age shall have the option of not sending the child to school until the child is six years of age. The parent or person having control of a child six years of age shall have the option of not sending the child to school until the child is seven years of age.

The above requirements are not to serve as barriers to immediate enrollment of students, designated as homeless or foster children as required by the Every Student Succeeds Act (ESSA) and the McKinney-Vento Act as amended by the ESSA. The District shall work with the local child welfare agency, the school last attended, or other relevant agencies to obtain necessary enrollment documentation.

The parent/guardian of any child who is denied admission to the district's schools, or an unaccompanied minor, a student eighteen years of age or older, a homeless child or youth or an unaccompanied youth who is denied schooling on the basis of residency, or an agent or officer charged with the enforcement of the laws concerning attendance at school may request, in writing, a hearing by the Board of Education.

The parent or person shall exercise such option by personally appearing at the school district office and signing an option form. The district shall provide the parent or person with information on the educational opportunities available in the school system.

A child who has attained the age of seventeen and who has voluntarily terminated enrollment with parental consent in the district's schools and subsequently seeks readmission may be denied readmission for up to ninety school days from the date of such termination, unless such child seeks readmission to the District not later than ten (10) school days after such termination in which case the Board shall provide school accommodations to such child not later than three school days after such child seeks readmission.

A child who has attained the age of nineteen or older may be placed in an alternative school program or other suitable educational program if he/she cannot acquire a sufficient number of credits for graduation by age twenty-one.

### Procedures.

1. Parents who wish their child to be admitted the following fall under this Policy must submit a letter of request to the building Principal no later than April 1 of the current school year. Following receipt of the letter, the Principal may schedule a meeting with the parents.
2. Upon receipt of the letter described above, the Principal will coordinate evaluation procedures with the elementary school psychologist and the school guidance counselor.
3. The evaluation for early admission Will include:
  - a. The "Wechsler Pre-School and Primary Scale of Intelligence-Revised (WPPSI-R) which shall be administered by the psychologist. To be eligible for early entrance, the child's scores must be above 130 on all scales of the WPPSI-R.

- b. An assessment of the child's social and emotional readiness to enter kindergarten. The assessment will be conducted by the school psychologist utilizing criteria approved by the Director of Pupil Services. o

5112

- c. Any other supplemental testing deemed necessary by the either the school psychologist or the counselor.
4. Following the evaluation(s), the counselor and psychologist will submit to the Principal a report of their findings which will include a joint recommendation concerning the request for early entrance.
  5. The Principal will review the report of the counselor and psychologist, make a decision regarding the child's early entrance and convey the decision to the parents in writing. If the request is denied, the Principal will offer to meet with the parents to discuss the reasons for the disapproval. If the request is approved, the parent will be made aware that information regarding class assignments will be mailed home routinely during the summer months. A decision will be made by the Principal by June 1 .
  6. In the event that the request is denied, the parents of the child may appeal the Principal's decision to the Director of Pupil Services. The Director of Pupil Services will base his/her decision on the appeal based on the results of the evaluations described in Section 3(a)-3(c) above and the report given to the Principal from the school psychologist and counselor. The Director of Pupil Services' decision shall be final and shall not be subject to further appeal.

Legal Reference: Connecticut General Statutes

10-15 Towns to maintain schools.

10-15c Discrimination in Public Schools Prohibited. School attendance by five-year olds.

10-76a-10-76g re special education

10-184 Duties of parents (re mandatory schooling for children age seven or older and under sixteen years, inclusive)

10-186 Duties of local and regional boards re school attendance. Hearing. Appeal to state board. Establishment of hearing board.

10-233a-10233f Suspension, expulsion and removal of pupils

10-220 & 221 State Board of Education Regulations.

Policy adopted..      October 1, 1990  
Policy Revised..      June 20, 2011

WESTON PUBLIC SCHOOLS  
Weston, Connecticut

## Appendix A

### WPS Request for Evaluation of Instructional Materials (R 1312)

The Weston Board of Education has delegated the responsibility for the selection of instructional materials which include instructional texts and educational materials to the Superintendent of Schools in consultation with the Assistant Superintendent and the district curriculum committee which includes teaching staff and library media specialists as applicable and has established evaluation procedures to address concerns about those resources in [P/R 1312](#). Completion of this form is required as outlined in those procedures.

To request an evaluation of instructional materials, complete the following form in its entirety and submit to the Superintendent of Schools through email.

---

Date	
Full Name	
Home Address	
Phone	
Email	
Are you an employee of WPS?	
Do you have a child/ children enrolled in WPS?	
Title of the instructional text or educational materials being evaluated <i>(Be specific and include a link to the resource if possible.)</i>	
Author and/or publisher of material <i>(if known)</i>	
Type of material being evaluated? <i>(book, movie, digital resource, etc.)</i>	
Class or grade level for intended use	
List all teachers/ administrators that you have spoken with about the material	

Describe your objection to the material. Be specific. Cite words, pages, and the nature of the content.	
Describe the nature of your objection to the material.	
What is your desired resolution?	
The complainant's signature signifies that he/she/they has read or otherwise viewed the material in full under evaluation.	
_____ Signature of Complainant	_____ Date

**Appendix B**  
**WPS Request for Evaluation of Instructional Materials (R 1312)**  
**Instructional Materials Review Committee Report**

**Ad Hoc Committee Members: (List names and titles)**

•

**Information received from the complainant(s):**

[insert the information submitted from Appendix A, WPS Request for Evaluation of Instructional Materials (R 1312)]

**Research/findings:**

***Consider the specific criteria from Policy and Regulation 6161***

Instructional texts and educational materials should be considered on the basis of:

1. Providing high-quality, age-appropriate materials that will help students develop critical thinking and highly effective communication skills.
2. Providing materials that will develop and foster an appreciation of cultural diversity and inclusivity in the United States and throughout the world.
3. Provide materials that contribute to the breadth of diverse viewpoints.
4. Providing all students an education that does not discriminate on the basis of race, age, color, religion, national origin, sex, gender, gender identity, or disabilities.
5. Selecting materials on the basis of, but not limited to –
  - a. pertinence to the curriculum and the objectives of the instructional program
  - b. accuracy and quality of content
  - c. cost-effectiveness in terms of use

**Committee Recommendation(s):**

*Recommendation*

*Justification*

**Date Submitted to the Superintendent for Review:** \_\_\_\_\_

## **Instruction Equipment, Books, and Materials**

The Weston Public Schools selects instructional materials which include instructional texts and educational materials to implement, enrich, and support the educational program for all students and the curricular and instructional needs of teachers. Selected instructional texts and educational materials will serve both the curriculum and the needs and interests of individual students. The district is committed to providing for a wide range of abilities and representing diverse viewpoints and cultures appropriate to and representative of student populations within and outside of the Weston community.

The Board of Education recognizes ~~that appropriate texts, library reference facilities, maps and globes, laboratory equipment, audiovisual equipment, art supplies, athletic equipment, current periodicals, tests and questionnaires, and similar materials are the tools of the teaching profession~~ **instructional texts and educational materials as necessary to implement, enrich and support the overall educational program for all students and teachers within the Weston Public Schools.** ~~The teaching staff will serve on curriculum committees and consult with the administration for the purpose of recommending improvements in curriculum and materials.~~ The Board of Education delegates authority for the recommendation and selection of instructional materials which include instructional texts and educational materials through the Superintendent of Schools in consultation with the Assistant Superintendent and the district curriculum committee which includes teaching staff and library media specialists as applicable. Instructional texts and educational materials include print and non-print resources and are explained below.

### **Instructional Texts**

These materials are tied to and embedded in the Weston Public Schools adopted and written curriculum which all students engage with and learn from. Materials may include textbooks, novels, periodicals, printed and electronic materials, graphic materials and charts, maps, reference tools, and other instructional materials and resources.

### **Educational Materials**

These materials are ancillary and supplemental to the Weston Public Schools adopted and written curriculum and are meant to enrich and enhance the educational program for Weston students but are not required resources for all students to engage with and learn from. Materials may include trade books, periodical publications, supplemental print and online materials, videos or other media, classroom libraries, library media center collections, and other educational materials and resources.

The Board of Education believes that at all times the schools should be as well equipped and maintained as may be possible within existing financial limitations.

~~An effort shall be made to ensure that comparable materials are available to all students throughout the school system.~~

The disposition of old and obsolete **instructional texts and educational materials** ~~textbooks~~ shall be accomplished under the direction of the Superintendent of Schools in accordance with state and district regulations.

(cf. 3260 - Sales & Disposal of Equipment, Books & Supplies)

Legal Reference: Connecticut General Statutes  
10-228 Free textbooks, supplies, materials and equipment  
10-229 Change of textbooks

Policy adopted: March 5, 1991  
March, 2024

WESTON PUBLIC SCHOOLS  
Weston, Connecticut

## Instruction

### Equipment, Books. Materials: Provision/Selection

It is the policy of the Board of Education to provide **instructional texts, and** educational materials, and equipment that support and enrich the curriculum ~~and~~ further the achievement of the district's instructional goals, **and support the interests and needs of students.**

The review and selection of ~~basic textbooks~~ **instructional texts** (the book or set of instructional **texts materials** that serve as the foundation for more than fifty percent of the course content shall be considered **the instructional texts**) ~~the basic textbook, referred to simply as "textbooks")~~ will be carried on continuously in order to keep up with the great expansion of knowledge and the rapid changes going on in our world today.

**Administrators, librarians, and teachers are responsible for the selection of appropriate educational material in accordance with the guidelines as set forth in the WPS Board of Education Policy 6161.**

~~Where applicable, all textbooks should present balanced views concerning the international, national and local issues and problems of the past, present and future. Textbooks should:~~ **In addition to the general policy guidelines, the following specific criteria are set forth for greater clarification. Textbooks Instructional texts and educational materials should be considered on the basis of:**

- ~~(1) Provide materials to stimulate growth in factual knowledge, literacy appreciation, aesthetic and ethical values.~~
- 1. Providing **high-quality, age-appropriate** materials that will help students develop ~~abilities in critical reading and thinking~~ **critical thinking and highly effective communication skills.**
- 2. Providing materials that will develop and foster an appreciation of cultural diversity and **inclusivity and development** in the United States and throughout the world.
- 3. **Provide materials that contribute to the breadth of diverse viewpoints.**
- 4. Providing all students an ~~effective basic~~ education that does not discriminate on the basis of race, age, color, religion, national origin, sex, **gender, gender identity**, or disabilities.
- ~~(5) Allow sufficient flexibility for meeting the special needs of individual students and groups of students.~~
- 5. **Selecting materials on the basis of, but not limited to –**
  - a. **pertinence to the curriculum and the objectives of the instructional program**
  - b. **accuracy and quality of content**
  - c. **cost-effectiveness in terms of use**

**Material selection is more than a process of material acquisition: it involves a process of continuous review of instructional texts and instructional materials. Administrators and teachers will regularly review procedures to ensure the currency and adequacy of their materials collections.**

The administration will develop and review administrative **guidelines rules**, outlining a procedure to select **instructional texts and educational materials textbooks** which meet the above criteria. This process will include:

1. Analysis, evaluation, and recommendation by professional staff and

2. The opportunity for interested citizens in the district to review recommendations **related to instructional texts** ~~textbooks~~ through the Board of Education's Curriculum Subcommittee.

The Board of Education will make the final **instructional texts** ~~textbook~~ selection decision **as recommended by the Superintendent of Schools as set forth in the WPS Board of Education Policy 6161.**

~~The Board of Education shall not change any textbooks used in the public schools except by a two-thirds vote of all the members of the Board. Notice of such intended change shall be given at a meeting of the Board held at least one week prior to the vote on the change.~~ **Consistent with applicable law, the WPS Board of Education retains authority to change instructional texts and shall not change any instructional texts used in the Weston Public Schools except by a two-thirds vote of all the members of the Board. Notice of any such intended change must have been previously given at a meeting of the Board held at least one week previous to the vote upon such change. If the Board does change its instructional texts pursuant to this section, the Board may donate the used instructional texts to another board of education. The Board recognizes that any Board action regarding instructional texts would occur only in extraordinary circumstances in which the Board, in consultation with the Superintendent and the Assistant Superintendent, determines that Board action is necessary or appropriate.**

(cf. 1220 - Citizens' Advisory Committees)  
(cf. 1312 - Public Complaints)  
(cf. 5145.2 – Freedom of Speech/Expression)  
(cf. 6144 - Controversial Issues)

Legal Reference: Connecticut General Statutes  
10-221 Boards of Education to prescribe rules  
10-228 Free textbooks, supplies, materials and equipment  
10-229 Change of textbooks  
President's Council, District 25 v. Community School Board lb. 25. 457 F.2d. 289  
1972), cert. denied. 409 U.S. 998 N::w. 1972

Minarcini v. Strongsville City School District, 541 F.2d. 577 (6th Cir. 1976)

Island Trees Union Free School District Board of Education v Pico, 457 US  
53(1982)

Academic Freedom Policy (adopted by Connecticut State Board of Education,  
9/9/81)

Regulation approved: March 5, 1991  
**March, 2024**

WESTON PUBLIC SCHOOLS  
Weston, Connecticut

## USE OF PRIVATELY OWNED TECHNOLOGICAL DEVICE BY STUDENTS

Students may possess privately-owned technological devices on school property and/or during school-sponsored activities, in accordance with the mandates of this policy and any applicable administrative regulations as may be developed by the Superintendent of Schools.

### Definitions

#### Board Technology Resources

For the purposes of this policy, “Board Technology Resources” refers to the Board’s computers and instructional technologies; communications and data management systems; informational technologies and the Internet; and any other technology resources owned and/or used by the school district and accessible by students.

#### Privately Owned Technological Devices

For the purposes of the this policy, “Privately Owned Technological Devices” refers to privately owned desktop computers, wireless and/or portable electronic hand-held equipment that can be used for word processing, wireless Internet access, image capture and recording, sound recording, information transmitting and/or receiving, storing, etc. These devices may include, but are not limited to, desktops, personal laptops, Smartphones, Smartwatches and other wearable technology, network access devices, Kindles, Nooks, cellular telephones, radios, personal audio players, I-Pads or other tablet computers, walkie-talkies, Blackberries, personal data assistants, iPhones, Androids and other electronic signaling devices.

### Use of Privately-Owned Technological Devices

Privately-owned technological devices may not be used during instructional time, except as specifically permitted by instructional staff or unless necessary for a student to access the district’s digital learning platform or otherwise engage in remote learning if remote learning has been authorized in accordance with applicable law.

On school property, at a school-sponsored activity, while in use for a remote learning activity if remote learning has been authorized in accordance with applicable law, or while being used to access or utilize the Board’s technology resources, the use of any such device for an improper purpose is prohibited. Improper purposes include, but are not limited to:

- Sending any form of harassing, threatening, or intimidating message, at any time, to any person (such communications may also be a crime);
- Gaining or seeking to gain unauthorized access to Board technology resources;
- Damaging Board technology resources;
- Accessing or attempting to access any material that is obscene, obscene as to minors, or

contains pornography;

- Cyberbullying;
  - Using such device to violate any school rule, including the unauthorized recording (photographic, video, or audio) of another individual without the permission of the individual or a school staff member; or
  - Taking any action prohibited by any Federal or State law.

### **Search of Privately Owned Technological Devices**

A student's privately owned technological device may be searched if the device is on Board property or in a student's possession at a school-sponsored activity and if there are reasonable grounds for suspecting that the search will turn up evidence that the student has violated or is violating either the law or the rules of the school. Any such search shall be reasonably related to the objectives of the search and not excessively intrusive in light of the age and sex of the student and the nature of the infraction.

### **Responsibility for Privately Owned Technological Devices**

Students are responsible for the safety and use of their privately owned technological devices. If a privately owned technology device is stolen, lost, or damaged, while the device is on school property or during a school-sponsored activity, a report should be made to the building principal, who will investigate the loss in a manner consistent with procedures for stolen or damaged personal property. Students and parents should be aware that the Board is not liable for any privately-owned technological device that is stolen, lost, or damaged while at school or during a school-sponsored activity. For that reason, students are advised not to share or loan their privately-owned technological devices with other students.

### **Disciplinary Action**

Misuse of the Board's technology resources and/or the use of privately-owned technological devices to access or utilize the Board's technology resources in an inappropriate manner or the use of such devices in any manner inconsistent with this policy will not be tolerated and will result in disciplinary action. For students, a violation of this policy may result in loss of access privileges, a prohibition on the use and/or possession of privately-owned technological devices on school property or at school sponsored activities, and/or suspension or expulsion in accordance with the Board's policies related to student discipline.

### **Access to Board Technology Resources**

The Weston Board of Education may permit students, using their privately owned technology devices, to access the Board's computers and instructional technologies; communications and data management systems; informational technologies and the Internet; and any other technology resources used by the school district and accessible by students. Additionally, it is the expectation of the Board of Education that students who access these resources while using privately-owned technology devices will act at all times appropriately in ways which are fully in accord with applicable policies concerning technology use as well as all local, state, and federal laws.

Through the publication and dissemination of this policy statement and others related to use of the Board's computer systems, as well as other instructional means, the Board educates students about the Board's expectations for technology users.

The Board technology resources shall only be used to access educational information and to promote learning activities both at home and at school. Students are expected to act at all times appropriately in ways which are fully in accord with applicable policies concerning technology use as well as all local, state, and federal laws when using the Board technology resources. Failure to do so will result in the consequences outlined herein and in other applicable policies (including, but not limited to, the Safe School Climate Plan, the Student Discipline Policy and the Use of Computers Policy).

Students must abide by the procedures outlined in this policy and all policies and applicable regulations outlined in the Board's computer use and other applicable policies. Students will be given specific information for log-on and access procedures for using school accounts. No user may deviate from these log-on/access procedures. Students are not permitted to share their log-on and password information, except a student may share such information with the student's parent/guardian for the purpose of enabling the parent/guardian to assist and/or supervise the student in connection with the student's use of school accounts.

Students are advised that the Board's network administrators have the capability to identify users and to monitor all privately-owned technological devices while they are **logged on to the network**. Students must understand that the Board has reserved the right to conduct monitoring of Board technology resources and can do so *despite* the assignment to individual users of passwords for system security. Any password systems implemented by the Board are designed solely to provide system security from unauthorized users, not to provide privacy to the individual system user. The system's security aspects, message delete function and personal passwords can be bypassed for monitoring purposes. Therefore, students should be aware that they should not have any expectation of personal privacy in the use of privately owned technological devices to access Board technology resources. This provision applies to any and all uses of the Board's technology resources and any privately owned technological devices that access the same.

### **Harm to Board Technology Resources**

Any act by a student using a privately-owned technological device that harms the Board's technology resources or otherwise interferes with or compromises the integrity of Board technology resources will be considered vandalism and will be subject to discipline and/or appropriate criminal or civil action.

### **Closed Forum**

This policy shall not be construed to establish a public forum or a limited open forum.

### **Legal References:**

Conn. Gen. Stat. § 10-233j Conn. Gen. Stat. § 31-48d

Conn. Gen. Stat. §§ 53a-182; 53a-183; 53a-250, *et seq.*  
Electronic Communication Privacy Act of 1986, Public Law 99-508, codified at 28  
U.S.C. §§ 2510 through 2520

Policy References:

Policy No. 5114, Student Discipline

Policy No. 5131.911, Bullying

Regulation No. 5131.911, Safe School Climate Plan

Policy 5135, Student Use of District's Computer Systems

Policy No. 6184, Unexpected Broadcast

Policy Adopted: October 19, 2020

Policy Revised: March 13, 2023

WESTON PUBLIC SCHOOLS  
Weston, Connecticut

## Cell Phone Use in School

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### Hurlbutt Elementary School

#### HES Family Handbook: Page 19 - Games and Valued Toys or Electronics

Expensive electronic games and valued personal collections (sports cards, stuffed animals, etc.) as well as cell phones and smartwatches must be left at home. The school cannot be responsible if these are broken or lost. Oftentimes, these take away from the learning that is going on in the classrooms. Of course, with the teacher's permission, collections may be brought to share with classmates. If your child has a cell phone, smartwatch or electronic device for use after school, it should remain in the backpack during the day and the school is not responsible for loss or damage.

### Weston Intermediate School

#### WIS Community Handbook: Page 14 - Electronic Devices and Cell Phones

Cell phones, smart watches, portable music players, and electronic games are not allowed during the school day at Weston Intermediate School. They have proven to cause great distress if they are lost or damaged, and they are very distracting to learning. If your child brings a cell phone or smart watch to school we will ask that it be turned off and placed in their backpack until the end of the day. If you need to contact your child during the day, call the main office, and we will be able to get a message to your child. If a device is seen or heard, the staff will remind the child to put it away. If this occurs a second time, the device will be taken and parents called to come pick it up.

### Weston Middle School

#### WMS Community Handbook: Page 11 - Cell Phones and Other Electronic Devices

In today's society, cell phones and other electronic devices have become an important part of life. While the school understands their usefulness, they can be a distraction at school. Students are not allowed to use these items during the school day. If brought to school, they must be turned off and out of sight, preferably in the student's locker. If students need to contact parents/guardians during the school day they may use the phone in the front office. If a student is ill and needs to be picked up, parent/guardians will receive a call from the nurse's office. All students will have access to technology through their personal Chromebook. If a student uses a cell phone or other personal electronic device during the school day, it will be confiscated until the end of the day. In the case of a second offense, parental retrieval of the phone will be required. Students are not permitted to use cell phones to capture video or pictures in school or on school sponsored transportation. Capturing video or taking pictures

may result in disciplinary consequences. The Weston Board of Education Student Discipline Policy, #5114(a), can be found in the Weston Board of Education Policy website.

Weston Middle School does not accept responsibility for these items if they are brought to school. See Weston Board of Education Policy 5136, Use of Privately Owned Technological Devices By Students and 5114(a), Student Discipline. Policy 5136 and Policy 5114(a) can be found on the Weston Board of Education website.

## Weston High School

### 2023-2024 Student Handbook: Page 37 - Cell Phones

The administration at WHS recognizes the changing role of smartphones and other mobile devices and seeks to support their use in furthering the instructional process. Navigating the benefits and potential distractions of these devices can consistently take time away from instruction and be burdensome to the teacher and students in the classroom. As we continue to assess the interference of these devices, school staff and administration will partner to support student engagement in the classroom.

As such, student personal devices will be required to be placed in the phone pocket in the classroom or kept in the student's backpack. Phones are not to be seen in the classroom without specific permission from the teacher. Students must also comply with the provisions of Board of Education Policy 5136. Students who do not meet classroom expectations, or who do not comply with Policy 5136, will be subject to disciplinary action. In addition, if students do not meet expectations, staff members are asked to confiscate cell phones or other mobile devices. When a confiscated device is delivered to the main office, the administration will determine whether to return the device to the student at the end of the school day, or require a parent/guardian to come to school to collect the device. Please see below for behavioral consequences:

1st Offense	Phone confiscated by teacher, student picks up in the office at the end of the day.
2nd Offense	Phone confiscated by the teacher, parent picks up the phone from the main office at the end of the day.
3rd Offense	Student must check their phone into the main office at the start of each day (can check 1x daily at lunch) for 5 school days. Referral to school counselor.
4th Offense	Student must check their phone into the main office at the start of each day (can check 1x daily at lunch) for 20 school days. Continue support with school counselor.

The school administration may search a student's cell phone or other mobile device, and retain such device beyond the school day if required to conduct the search, if there are reasonable grounds at the inception of the search for suspecting that the search will reveal evidence that the student has violated or is violating either the law or the rules of the school. Board of Education Policy [#5136](#).

**MEMORANDUM OF AGREEMENT**  
**(subject to ratification by both parties)**

WHEREAS, the Weston Board of Education (the “Board”) and the Weston Administrators’ Association (“WAA”) (together, the “parties”) are parties to a collective bargaining agreement covering the period July 1, 2023 through June 30, 2026 (the “Contract”); and

WHEREAS, Appendix B of the Contract provides, in relevant part:

The Board will fund fifty percent (50%) of the applicable HSA deductible amount for each full-time administrator who elects coverage under the high deductible/HSA plan (with pro-rated funding of the deductible for part-time administrators). The Board's contribution toward the HSA deductible will be deposited into the HSA accounts in four equal quarterly installments throughout the course of each plan year, on the Board's payroll dates. The parties acknowledge that the Board's contribution toward the funding of the HSA plan is not an element of the underlying insurance plan, but rather relates to the manner in which the deductible shall be funded for actively employed administrators. The Board shall have no obligation to fund any portion of the SA deductible for retirees or other individuals upon their separation from employment. In the event that a member elects the high deductible/HSA plan after the start of the plan year, the Board's contribution toward the funding of the deductible shall be pro-rated for that year.

; and

WHEREAS, the Board, **acting through its Superintendent**, wishes to modify the above-cited provision of Appendix B as set forth herein; and

WHEREAS, the parties wish to memorialize their agreement regarding this change.

NOW, THEREFORE, the parties agree as follows:

1. The following provision of Appendix B the Contract shall be amended as follows, with additions shown by bolded, italicized text and deletions shown by strikethrough text:

The Board will fund fifty percent (50%) of the applicable HSA deductible amount for each full-time administrator who elects coverage under the high deductible/HSA plan (with pro-rated funding of the deductible for part-time administrators). The Board's contribution toward the HSA deductible will be deposited into the HSA accounts ~~in four equal quarterly installments throughout the course of each plan year, on the Board's payroll dates.~~ ***on September 1 of each such contract year or, if September 1 is not a business day, on the next business***

*day thereafter. Notwithstanding the foregoing, for the Fiscal Year 2023-2024 only, the Board's contribution toward the HSA deductible will be deposited into the HSA accounts as follows: fifty percent (50%) on July 3, 2023 and fifty percent (50%) on September 1, 2023.* The parties acknowledge that the Board's contribution toward the funding of the HSA plan is not an element of the underlying insurance plan, but rather relates to the manner in which the deductible shall be funded for actively employed administrators. The Board shall have no obligation to fund any portion of the SA deductible for retirees or other individuals upon their separation from employment. In the event that a member elects the high deductible/HSA plan after the start of the plan year, the Board's contribution toward the funding of the deductible shall be pro-rated for that year.

2. All provisions of the Contract shall remain in effect except to the extent such provisions have been modified by this Memorandum of Agreement.
3. The Contract shall be amended to reflect the change described in Paragraph 1 above. The Board shall post the amended Contract on the Board's website and the WAA shall make the amended Contract available to bargaining unit members.

WESTON BOARD OF EDUCATION

WESTON ADMINISTRATORS'  
ASSOCIATION

By: \_\_\_\_\_  
Date: \_\_\_\_\_

By: \_\_\_\_\_  
Date: \_\_\_\_\_

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**INTEROFFICE MEMORANDUM**

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**To:** Lisa Barbiero

**From:** Paul Rasmussen, Ed.D. - Director of Human Resources

**Subject:** Consent Agenda – BOE MTG 3/18/2024

**Date:** 3/13/2024

**NEW HIRES:**

- Sara Willstatter (1.0) (WIS) Paraeducator. Effective March 18, 2024
- Julia Rusk (1.0) (WIS) Speech and Language Pathologist. Effective August 27, 2024

**RETIREMENTS:**

- None

**RESIGNATIONS:**

- William LaPlaca (1.0) (WIS) Paraeducator. Effective March 15, 2024
- Briana O’Neill (1.0) (WHS) Speech and Language Pathologist. Effective March 28, 2024

**WESTON BOARD OF EDUCATION**

**Weston, CT**

**Meeting Date:** 3/18/24

**Information Only**

**Action Requested**

**Agenda Item Subject:** Approval of the February 2024 Financial Report

**Submitted by:** Phillip Cross

**Document Summary/Purpose and/or Recommended Action:**

Following is the 8th FY24 (February 2024) Financial Report Including Internal Services Fund (for Dental). We are recommending approval of the report.

For more Board of Education Meeting and Committee Meeting Information, visit:  
<https://meeting.cabe.org/public/Agency.aspx?PublicAgencyID=47&AgencyTypeID=1>



March 15, 2024

**TO:** BOE Finance Committee

**FROM:** Phillip Cross, Director of Finance and Operations

**SUBJECT:** FY 2023-24 Financial Report for the Period Ending February 29, 2024

**Financial Summary**

Below is the year- to-date financial summary for the period ending February 29, 2024:

FY 2023-24 CATEGORY SUMMARY								
Object Series	Adjusted Budget	YTD Actuals	Encumbrance	Anticipated	Total Projected Expenditures	Available Balance	Previous Month Balance	Month Over Month Change
Salaries (1000's)	35,291,095	19,956,273	13,977,152	906,086	34,839,511	451,584	382,303	69,281
Benefits (2000's)	10,267,746	6,817,778	3,615,157	(437,037)	9,995,898	271,848	271,848	-
Professional Services (3000's)	1,561,743	845,122	986,186	77,955	1,909,263	(347,521)	(347,521)	-
Property Services (4000s)	2,143,534	954,595	998,888	420,052	2,373,534	(230,000)	(230,000)	-
Other Services (5000s)	6,721,993	4,489,930	2,142,742	116,190	6,748,862	(26,869)	(26,869)	-
Supplies (6000s)	2,848,163	1,562,958	1,240,185	164,278	2,967,421	(119,259)	(303,869)	184,610
Equipment (7000s)	182,091	82,756	145,197	-	227,953	(45,862)	(45,862)	-
Other Objects (8000s)	123,195	107,202	19,018	(3,025)	123,195	-	-	-
Revenue (9000s)	(1,194,505)	(1,012,396)	8,300	(456,093)	(1,460,189)	265,684	262,575	3,110
<b>Total</b>	<b>\$ 57,945,055</b>	<b>\$33,804,218</b>	<b>\$ 23,132,826</b>	<b>\$ 788,406</b>	<b>\$ 57,725,449</b>	<b>\$219,606</b>	<b>(\$37,396)</b>	<b>\$257,001</b>

**Month over Month Changes:**

The month over month change is \$257,001

The breakdown of the changes are as follows:

**Salaries - \$69,281**

- Administrator turnover savings - \$19,124
- FMLA savings – Unpaid maternity leave - \$50,157

**Electricity- \$184,610**

ELECTRICITY						
Description	KWH	Generation/Supply Cost	Delivery Cost	VNM Gen	VNM Credit	Total
Budget	5,127,268	494,442	471,074	252,968	(352,399)	866,085
Projected	5,108,089	493,726	448,450	140,974	(401,675)	681,475
<b>Variance</b>	<b>19,179</b>	<b>\$716</b>	<b>\$22,624</b>	<b>\$111,994</b>	<b>\$49,276</b>	<b>\$184,610</b>

Primarily because of virtual net metering (VNM) credits and savings there will be a favorable balance in the electricity account. Earlier in the fiscal year we reported that as of August the BoE and the town earned the maximum annual credit allowed (approximately \$244,000) on two of our VNM contracts.

For the fiscal year ended June 30, 2023, the credits exceeded both the electricity generation and delivery charges on our Eversource invoices by \$107,780. These credits were carried forward and applied to charges for fiscal year 2024. The combined projected credits for the period January to June 2024, and the carry forward credits is projected to be greater than budget by \$49,276.

In addition, as the BoE was no longer receiving credits, there was no associated fee for generation for the period August to December. Based on historical generation we estimate that a savings of approximately \$112,000. Further, the Eversource delivery charge is projected to be below budget by \$22,624.

The Combined projected savings will be \$184,610.

**Internal Services Fund**

Dental claims and fees are in-line with historical averages.

**WESTON PUBLIC SCHOOLS  
INTERNAL SERVICES FUND  
FOR HEALTH BENEFITS PROGRAM**

Fiscal Year Ended							2024
<b>STATEMENT OF REVENUES AND EXPENDITURES</b>							
Fund Balance -July 1, 2023							\$ 418,466
Revenues:							
General Fund							\$ 434,330
Reimbursements							\$ -
Total Contributions							\$ 434,330
Total Revenues (A)							\$ 434,330
Actual Claims:							
Delta Dental:							
Claims							\$ 411,980
Administrative Fees							\$ 22,350
Total Dental Claims (B)							\$ 434,330
Net Change (A-B)							\$ -
<b>Projected Fund balance June 30, 2024</b>							<b>\$ 418,466</b>
<hr/>							
<b>Dental- Actual Claims &amp; Fees</b>							
		<b>Claims &amp; Fees</b>					
<b>Month</b>							
July							33,350
August							40,186
September							20,239
October							28,564
November							34,292
December							26,288
January							27,039
February							34,543
<b>Total</b>							<b>\$ 244,501</b>
Actual YTD Spend Rate							56.3%
Theoretical YTD Spend Rate							66.7%
YTD Theoretical variance %							-10.4%

**WESTON PUBLIC SCHOOLS**

**FYE 24 FINANCIAL REPORT**

As of February 29, 2024

Period: 8 of 12

2020-2021 Year-End Expense	2021-2022 Year-End Expense	2022-2023 Year-End Expense	Object Code	Description	2023-2024							
					Adopted Budget	Budget Transfers	Adjusted Budget	YTD Expended	Encumbered	Anticipated	Expended & Encumbered To EOY	Balance Available
				<i>Salaries &amp; Wages (1000s)</i>								
2,721,241	2,881,354	2,854,614	1110	Administrators	3,289,372	40,000	3,329,372	2,174,252	1,106,742	55,143	3,336,137	(6,765)
13,925,352	14,465,388	14,827,266	1111	General Ed. Teachers	15,410,044	-	15,410,044	8,474,731	6,746,374	-	15,221,106	188,938
2,372,055	2,303,563	2,522,780	1112	Special Ed. Teachers	2,419,305	-	2,419,305	1,279,356	1,101,767	-	2,381,123	38,182
1,031,899	983,206	1,021,018	1113	Guidance	1,071,301	(80,193)	991,108	516,785	431,538	-	948,323	42,785
503,136	468,881	397,172	1114	Psychologist	418,788	-	418,788	225,501	193,287	-	418,788	-
162,383	202,927	353,558	1115	Social Worker	382,038	80,193	462,231	241,257	169,987	-	411,245	50,986
555,781	543,134	539,131	1116	Speech & Hearing	605,719	-	605,719	314,552	207,664	-	522,215	83,504
1,046,642	1,184,208	887,328	1117	Academic Assistants	1,207,351	59,724	1,267,075	707,502	568,996	-	1,276,498	(9,423)
210,287	169,686	110,854	1118	Talented & Gifted	119,448	(59,724)	59,724	32,159	27,565	-	59,724	(0.05)
412,193	403,577	400,239	1119	Library/Media	430,504	-	430,504	245,944	212,266	-	458,209	(27,705)
47,413	46,587	57,886	1135	Transition Coordinator	66,427	-	66,427	35,768	30,659	-	66,427	(0.20)
785,011	832,301	847,138	1139	Certified Stipends	952,246	-	952,246	461,599	92,780	372,215	926,594	25,652
577,980	574,562	651,668	1140	Academic Leader (CIL's)	1,011,911	-	1,011,911	547,775	421,910	-	969,686	42,225
1,779	2,650	1,852	1141	Mentor Teacher	3,000	-	3,000	50	-	2,950	3,000	-
277,908	187,872	113,090	1142	Behavioral Analyst	233,099	-	233,099	-	-	-	-	233,099
45,069	45,835	58,267	1145	English Language Learner	83,614	-	83,614	37,453	33,052	-	70,504	13,110
<b>\$ 24,676,129</b>	<b>\$ 25,295,731</b>	<b>\$ 25,643,861</b>		<b>Sub-Total Certified Salaries</b>	<b>\$ 27,704,167</b>	<b>\$ 40,000</b>	<b>\$ 27,744,167</b>	<b>\$ 15,294,685</b>	<b>\$ 11,344,586</b>	<b>\$ 430,308</b>	<b>\$ 27,069,579</b>	<b>674,588</b>
					8.03%			55.1%	40.9%	1.6%	97.6%	2.4%
				<i>Other Certified Salaries</i>								
28,996	45,700	40,788	1131	Homebound Tutor	44,500	-	44,500	10,708	-	33,792	44,500	-
-	-	-	1136	Degree Level Change	44,390	-	44,390	-	-	-	-	44,390
164,963	278,078	246,814	1137	Substitute Teacher	178,801	-	178,801	111,898	20,540	46,363	178,801	-
243,990	212,521	189,064	1138	Summer Work -Certified Staff	180,408	-	180,408	127,152	-	53,256	180,408	-
106,600	99,315	127,403	1143	Building Substitutes	203,175	-	203,175	87,653	78,758	36,765	203,175	-
608,730	295,291	385,336	1144	Long term Substitute	118,000	-	118,000	105,554	30,562	(18,116)	118,000	-
-	-	-	1160	Turnover Savings	(170,000)	-	(170,000)	-	-	-	-	(170,000)
<b>\$ 1,153,278</b>	<b>\$ 930,904</b>	<b>\$ 989,404</b>		<b>Sub-Total Other Certified Salaries</b>	<b>\$ 599,274</b>	<b>\$ -</b>	<b>\$ 599,274</b>	<b>\$ 442,965</b>	<b>\$ 129,859</b>	<b>\$ 152,059</b>	<b>\$ 724,884</b>	<b>\$ (125,610)</b>
								73.9%	21.7%	25.4%	121.0%	-21.0%

**WESTON PUBLIC SCHOOLS**

**FYE 24 FINANCIAL REPORT**

As of February 29, 2024

Period: 8 of 12

2020-2021 Year-End Expense	2021-2022 Year-End Expense	2022-2023 Year-End Expense	Object Code	Description	2023-2024							
					Adopted Budget	Budget Transfers	Adjusted Budget	YTD Expended	Encumbered	Anticipated	Expended & Encumbered To EOY	Balance Available
				<i>Non-Certified Salaries</i>								
373,111	381,506	413,013	1210	Non-Cert. Supervisors	399,263	-	399,263	317,367	179,291	-	496,658	(97,395)
234,060	223,520	213,706	1211	Nurses	231,336	6,981	238,317	139,990	98,327	-	238,317	-
297,217	306,924	247,373	1215	Occupational & Physical Therapists	318,970	6,385	325,355	152,732	172,623	-	325,355	-
1,199,438	1,140,104	1,156,839	1221	Administrative Support	1,245,726	53,677	1,299,403	792,066	510,769	(3,432)	1,299,403	-
1,837,631	1,767,360	1,697,360	1231	Para Educators	1,754,083	141,928	1,896,012	1,126,733	731,788	37,490	1,896,012	-
129,307	146,862	156,413	1234	Bus Aides	147,297	-	147,297	80,164	-	67,133	147,297	-
600,663	485,773	495,877	1235	Technicians	495,836	13,924	509,760	320,854	185,889	3,017	509,760	-
61,157	61,996	65,017	1237	Vocational Specialist	63,818	1,915	65,733	31,498	34,234	-	65,733	-
246,331	247,175	262,406	1241	Safety Monitors	292,184	5,341	297,525	169,761	111,487	16,277	297,525	-
509,851	506,491	513,999	1251	Custodians	515,130	17,225	532,355	330,734	200,771	850	532,355	-
492,769	460,027	477,370	1261	Maintenance Mechanics & Grounds	531,335	13,232	544,567	338,678	205,367	522	544,567	-
74,781	84,861	90,458	1269	Athletic Support Staff	114,325	-	114,325	53,821	29,136	31,369	114,325	-
182,698	197,442	192,939	1280	Non Certified Stipends	197,155	-	197,155	103,122	43,024	51,008	197,155	-
<b>\$ 6,239,015</b>	<b>\$ 6,010,040</b>	<b>\$ 5,982,771</b>		<b>Sub-Total Non-Certified Salaries</b>	<b>\$ 6,306,458</b>	<b>\$ 260,607</b>	<b>\$ 6,567,065</b>	<b>\$ 3,957,519</b>	<b>\$ 2,502,707</b>	<b>\$ 204,234</b>	<b>\$ 6,664,460</b>	<b>\$ (97,395)</b>
				<i>Other Non-Certified Salaries</i>				60.3%	38.1%	3.1%	101.5%	-1.5%
28,910	47,199	39,524	1213/122 3/1233	Non-Certified Substitutes	47,500	-	47,500	18,085	-	29,415	47,500	-
135,970	176,085	199,553	1212/22/ 38/42/52/ 62	Overtime	203,700	-	203,700	143,770	-	59,930	203,700	-
104,948	127,252	114,912	1268	Summer Work-Non-Cert.	129,388	-	129,388	99,248	-	30,140	129,388	-
-	-	-	1270	Salary Differential	300,607	(300,607)	-	-	-	-	-	-
<b>\$ 269,828</b>	<b>\$ 350,536</b>	<b>\$ 353,988</b>		<b>Sub-Total Other Salaries</b>	<b>\$ 681,195</b>	<b>\$ (300,607)</b>	<b>\$ 380,588</b>	<b>\$ 261,104</b>	<b>\$ -</b>	<b>\$ 119,484</b>	<b>\$ 380,588</b>	<b>-</b>
								68.6%	0.0%	31.4%	100.0%	0.0%
<b>\$ 32,338,250</b>	<b>\$ 32,587,211</b>	<b>\$ 32,970,025</b>		<b>TOTAL SALARIES</b>	<b>\$ 35,291,095</b>	<b>-</b>	<b>\$ 35,291,095</b>	<b>\$ 19,956,273</b>	<b>\$ 13,977,152</b>	<b>\$ 906,086</b>	<b>\$ 34,839,511</b>	<b>\$ 451,584</b>
					7.04%			56.5%	39.6%	2.6%	98.7%	1.3%

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2020-2021 Year-End Expense	2021-2022 Year-End Expense	2022-2023 Year-End Expense	Object Code	Description	2023-2024							
					Adopted Budget	Budget Transfers	Adjusted Budget	YTD Expended	Encumbered	Anticipated	Expended & Encumbered To EOY	Balance Available
				<i>Benefits (2000's)</i>								
8,324,773	8,412,125	9,202,598	2000	Health Insurance	8,789,192	-	8,789,192	6,176,754	2,568,660	-	8,745,413	43,779
(1,437,860)	(1,508,844)	(1,705,489)	2022	Premium Cost Share	(1,437,949)	-	(1,437,949)	(929,356)	-	(487,684)	(1,417,040)	(20,909)
562,991	540,802	548,959	2001	Social Security	433,234	-	433,234	323,960	109,274	-	433,234	-
464,653	465,667	471,544	2002	Medicare	560,567	-	560,567	278,155	282,412	-	560,567	-
175,279	175,275	175,214	2003	Workers Compensation	175,214	-	175,214	180,451	-	-	180,451	(5,237)
56,973	25,494	14,660	2004	Unemployment Compensation	60,000	-	60,000	852	35,000	24,148	60,000	-
468,582	149,718	130,080	2005	Early Retirement Incentive	-	-	-	-	-	-	-	-
1,072,998	1,177,822	1,328,122	2007	Pension Contributions	1,489,387	-	1,489,387	720,030	515,142	-	1,235,172	254,215
75,005	83,227	91,124	2010	Tuition Reimbursement	85,500	-	85,500	-	85,500	-	85,500	-
63,528	63,952	63,051	2011-12	Life & Disability Insurance	67,600	-	67,600	47,286	19,169	1,145	67,600	-
86,591	105,506	56,400	2014	Sick Bank	45,000	-	45,000	19,646	-	25,354	45,000	-
<b>\$9,913,513</b>	<b>\$9,690,744</b>	<b>\$10,376,262</b>		<b>TOTAL BENEFITS</b>	<b>\$10,267,746</b>	<b>\$ -</b>	<b>\$10,267,746</b>	<b>\$6,817,778</b>	<b>\$3,615,157</b>	<b>(\$437,037)</b>	<b>\$9,995,898</b>	<b>\$271,848</b>
					-1.05%			66.4%	35.2%	-4.3%	97.4%	2.65%
				<i>Professional &amp; Technical Services (3000s)</i>								
174,773	545,611	504,232	3210	Contracted Services Educational	285,176	-	285,176	282,593	350,103	-	632,696	(347,520)
139,888	128,921	149,405	3220-21	Consulting Services	174,835	-	174,835	83,965	80,611	10,259	174,835	-
89,901	123,549	75,937	3235	Testing	94,270	-	94,270	65,714	17,300	11,256	94,270	-
210,355	6,158	106,990	3239	Other Pupil Services	292,400	-	292,400	136,294	144,706	11,400	292,400	-
220,134	64,991	66,056	3303	Management Services	47,243	-	47,243	25,520	12,251	9,472	47,243	-
2,015	1,775	2,064	3304	License Fees-Facilities	3,500	-	3,500	3,077	240	183	3,500	-
204,996	245,731	232,999	3306	Legal Fees-SPED	240,000	-	240,000	102,934	117,066	20,000	240,000	-
164,948	167,193	187,860	3306	Legal Fees- Districtwide	150,000	-	150,000	62,409	106,872	(19,281)	150,000	-
83,425	95,138	106,091	3308	Police/Fire	117,799	-	117,799	45,773	61,125	10,901	117,799	-
72,208	67,382	67,685	3309	Professional Technical Services	102,978	-	102,978	36,843	42,369	23,766	102,978	-
21,917	49,966	41,996	3310	Sports Officials	53,542	-	53,542	-	53,542	-	53,542	-
<b>\$ 1,384,560</b>	<b>\$ 1,496,415</b>	<b>\$ 1,541,315</b>		<b>TOTAL PROF. &amp; TECH SERVICES</b>	<b>\$ 1,561,743</b>	<b>\$ -</b>	<b>\$ 1,561,743</b>	<b>\$ 845,122</b>	<b>\$ 986,186</b>	<b>\$ 77,955</b>	<b>\$ 1,909,263</b>	<b>\$ (347,520)</b>
								54.1%	63.1%	5.0%	122.3%	-22.3%

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2020-2021 Year-End Expense	2021-2022 Year-End Expense	2022-2023 Year-End Expense	Object Code	Description	2023-2024							
					Adopted Budget	Budget Transfers	Adjusted Budget	YTD Expended	Encumbered	Anticipated	Expended & Encumbered To EOY	Balance Available
				<i>Property Services (4000s)</i>								
848,529	859,036	907,204	4200	Cleaning Services	979,576	-	979,576	484,588	484,588	10,400	979,576	-
39,855	48,405	50,825	4202	Rubbish Removal	67,547	-	67,547	32,788	29,404	5,355	67,547	-
68,301	122,591	82,370	4302	Equipment Repairs	165,551	-	165,551	44,941	76,610	44,000	165,551	-
155,864	164,029	184,530	4400	Equipment Rental	164,217	-	164,217	94,341	73,417	(3,541)	164,217	-
121,171	74,770	213,171	4500	Repair Allowance	150,000	-	150,000	38,831	40,311	70,858	150,000	-
64,302	29,913	30,182	4514	Fire Alarm System	32,000	-	32,000	34,821	2,609	(5,430)	32,000	-
167,812	172,720	201,994	4518	Sewer System Plant Maintenance	144,795	-	144,795	23,103	121,692	-	144,795	-
145,229	171,669	205,809	4520	Service Contracts	166,899	-	166,899	117,450	79,223	(29,774)	166,899	-
58,389	61,247	93,203	4530	Parks & Recreation	77,759	-	77,759	-	62,000	15,759	77,759	-
12,703	16,959	39,271	4540	Athletic Facilities Repairs	59,500	-	59,500	18,550	15,180	25,770	59,500	-
151,315	186,270	195,029	4541	Contracted Services	89,300	-	89,300	26,669	6,766	55,865	89,300	-
53,702	122,304	109,755	4600	Special Projects	-	-	-	-	-	230,000	230,000	(230,000)
9,450	2,366	11,275	4604	Snow Plowing	10,500	-	10,500	3,413	7,087	-	10,500	-
81,552	138,631	35,888	4701	Security System Monitoring	35,890	-	35,890	35,100	-	790	35,890	-
<b>\$ 1,978,173</b>	<b>\$ 2,170,908</b>	<b>\$ 2,360,505</b>		<b>TOTAL PROPERTY SERVICES</b>	<b>\$ 2,143,534</b>	<b>\$ -</b>	<b>\$ 2,143,534</b>	<b>\$ 954,595</b>	<b>\$ 998,888</b>	<b>\$ 420,052</b>	<b>\$ 2,373,534</b>	<b>\$ (230,000)</b>
								44.5%	46.6%	19.6%	110.7%	-10.7%

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2020-2021 Year-End Expense	2021-2022 Year-End Expense	2022-2023 Year-End Expense	Object Code	Description	2023-2024							
					Adopted Budget	Budget Transfers	Adjusted Budget	YTD Expended	Encumbered	Anticipated	Expended & Encumbered To EOY	Balance Available
				<i>Other Services (5000s)</i>								
1,509,158	1,589,157	1,592,600	5100	Regular Transportation	1,687,804	-	1,687,804	1,695,437	35,686	-	1,731,123	(43,319)
490,473	729,788	843,911	5101	SPED Transportation	1,010,779	-	1,010,779	641,789	294,491	-	936,280	74,499
54,105	96,953	218,024	5104	Athletic Transportation	175,062	-	175,062	47,535	21,665	62,437	131,637	43,425
-	1,537	12,802	5105	Extra-Curricular Transportation	15,497	-	15,497	728	1,278	13,491	15,497	-
67,457	104,190	160,181	5112	Diesel & Gasoline	115,670	-	115,670	61,339	54,331	-	115,670	-
89,784	103,321	128,142	5200	General Liability Insurance	142,980	-	142,980	136,003	-	-	136,003	6,977
16,650	15,525	14,400	5202	Athletic Insurance	14,400	-	14,400	15,008	-	-	15,008	(608)
97,536	100,707	104,154	5205	Property Insurance	109,362	-	109,362	106,579	-	-	106,579	2,783
87,620	89,975	87,714	5300	Communications	94,106	-	94,106	53,506	34,411	6,189	94,106	-
30,801	30,990	27,469	5400	Postage	29,383	-	29,383	20,105	5,093	4,185	29,383	-
2,592	4,440	853	5500	Advertising	4,000	-	4,000	924	44	3,032	4,000	-
14,386	17,176	16,962	5501	Printing	24,437	-	24,437	12,387	4,129	7,921	24,437	-
1,528,352	2,007,688	2,367,437	5600	Out of District Tuition	2,335,763	-	2,335,763	1,309,505	1,041,533	-	2,351,038	(15,275)
1,044,742	923,345	1,063,918	5601	Tuition Settlements	903,461	-	903,461	355,419	643,394	-	998,813	(95,352)
286,110	-	-	5605	Tuition - ESS Contract	-	-	-	-	-	-	-	-
29,716	15,346	41,076	5800	Travel & Conference	42,227	-	42,227	29,866	3,747	8,614	42,227	-
6,106	3,163	3,803	5801	Mileage Reimbursement	10,430	-	10,430	1,643	-	8,787	10,430	-
3,190	2,349	5,684	5900	Other Purchased Services	6,632	-	6,632	2,156	2,942	1,533	6,632	-
<b>\$ 5,358,780</b>	<b>\$ 5,835,649</b>	<b>\$ 6,689,130</b>		<b>TOTAL OTHER SERVICES</b>	<b>\$ 6,721,993</b>	<b>\$ -</b>	<b>\$ 6,721,993</b>	<b>\$ 4,489,930</b>	<b>\$ 2,142,742</b>	<b>\$ 116,190</b>	<b>\$ 6,748,862</b>	<b>\$ (26,869)</b>
								66.8%	31.9%	1.7%	100.4%	-0.4%
				<i>Supplies &amp; Materials (6000's)</i>								
418,014	395,832	884,656	6110	Materials	547,140	-	547,140	247,617	506,763	80,104	834,485	(287,345)
17,064	22,091	36,390	6120	Office Materials	32,908	-	32,908	14,421	10,786	7,702	32,908	-
136,447	184,684	174,050	6130	Maintenance Materials	181,624	-	181,624	73,587	65,930	42,108	181,624	-
37,883	71,587	95,137	6131	Custodial Materials	78,348	-	78,348	52,027	17,383	8,938	78,348	-
12,891	16,815	21,943	6132	Security Materials	17,184	-	17,184	22,377	2,777	(7,971)	17,184	-
489,133	522,319	517,581	6140	Software	566,868	-	566,868	561,153	8,913	(3,198)	566,868	-
324,134	196,324	98,833	6410	Books	103,552	-	103,552	63,646	20,036	36,395	120,077	(16,524)
358,623	388,111	325,229	6510	Heating Oil	454,796	-	454,796	205,770	249,026	-	454,796	-
705,182	722,884	482,463	6520	Electricity	862,742	-	862,742	321,613	356,519	-	678,132	184,610
1,431	2,079	2,890	6530	Propane	3,000	-	3,000	748	2,052	200	3,000	-
<b>\$ 2,500,801</b>	<b>\$ 2,522,725</b>	<b>\$ 2,639,172</b>		<b>TOTAL SUPPLIES &amp; MATERIALS</b>	<b>\$ 2,848,163</b>	<b>\$ -</b>	<b>\$ 2,848,163</b>	<b>\$ 1,562,958</b>	<b>\$ 1,240,185</b>	<b>\$ 164,278</b>	<b>\$ 2,967,421</b>	<b>\$ (119,259)</b>
								54.9%	43.5%	5.8%	104.2%	-4.2%

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2020-2021 Year-End Expense	2021-2022 Year-End Expense	2022-2023 Year-End Expense	Object Code	Description	2023-2024							
					Adopted Budget	Budget Transfers	Adjusted Budget	YTD Expended	Encumbered	Anticipated	Expended & Encumbered To EOY	Balance Available
				<i>Equipment (7000's)</i>								
629,991	541,176	192,826	7300	Equipment	182,091	-	182,091	82,756	145,197	-	227,953	(45,862)
<b>\$ 629,991</b>	<b>\$ 541,176</b>	<b>\$ 192,826</b>		<b>TOTAL EQUIPMENT</b>	<b>\$ 182,091</b>	<b>\$ -</b>	<b>\$ 182,091</b>	<b>\$ 82,756</b>	<b>\$ 145,197</b>	<b>\$ 0</b>	<b>\$ 227,953</b>	<b>\$ (45,862)</b>
								45.4%	79.7%	0.0%	125.2%	-25.2%
				<i>Other Objects (8000's)</i>								
80,424	87,211	87,938	8100	Dues, Fees and Memberships	97,850	-	97,850	85,224	3,367	9,259	97,850	-
20,110	24,317	32,434	8900	Other Objects	25,345	-	25,345	21,978	15,651	(12,284)	25,345	-
<b>\$ 100,534</b>	<b>\$ 111,528</b>	<b>\$ 120,372</b>		<b>TOTAL OTHER OBJECTS</b>	<b>\$ 123,195</b>	<b>\$ -</b>	<b>\$ 123,195</b>	<b>\$ 107,202</b>	<b>\$ 19,018</b>	<b>\$ (3,025)</b>	<b>\$ 123,195</b>	<b>\$ -</b>
								87.0%	15.4%	-2.5%	100.0%	0.0%
				<i>Revenue Offset (9000's)</i>								
(22,498)	(29,042)	(29,462)	9200	Technology Revenue	(29,903)	-	(29,903)	(29,903)	-	-	(29,903)	-
(61,920)	(73,800)	(74,800)	9201	Participation Fees, Athletics	(63,761)	-	(63,761)	(60,100)	8,300	(11,961)	(63,761)	-
-	(18,350)	(21,689)	9202	Gate Receipts, Athletics	(14,000)	-	(14,000)	(7,120)	-	(6,880)	(14,000)	-
(134,377)	(77,445)	(89,987)	9204	Transportation Credits	-	-	-	(25,495)	-	-	(25,495)	25,495
(859,340)	(812,440)	(928,213)	9205	Excess Cost SPED	(787,045)	-	(787,045)	(643,253)	-	(214,418)	(857,671)	70,626
(74,625)	(79,561)	(121,242)	9206	Pre School Tuition	(64,062)	-	(64,062)	(91,000)	-	(69,930)	(160,930)	96,868
(76,283)	(75,981)	(119,873)	9207	Non-Resident Tuition	(87,478)	-	(87,478)	(122,578)	-	(18,583)	(141,161)	53,683
(37,813)	(19,878)	(61,203)	9208	Revenue from Town for Fields	(42,681)	-	(42,681)	-	-	(42,681)	(42,681)	-
(11,000)	(40,000)	(30,800)	9209	Parking Fees	(31,050)	-	(31,050)	-	-	(31,050)	(31,050)	-
(14,161)	(46,050)	(42,223)	9210	Theater Receipts	(51,025)	-	(51,025)	(7,935)	-	(43,090)	(51,025)	-
-	-	-	9212	Facility Use Rental	(17,500)	-	(17,500)	-	-	(17,500)	(17,500)	-
(6,815)	(4,768)	(14,336)	9215	Medicaid Revenue	(6,000)	-	(6,000)	(25,012)	-	-	(25,012)	19,012
<b>(\$1,298,832)</b>	<b>(\$1,277,316)</b>	<b>(\$1,533,828)</b>		<b>Total Revenue Offset</b>	<b>(\$1,194,505)</b>	<b>\$ -</b>	<b>(\$1,194,505)</b>	<b>(\$1,012,396)</b>	<b>\$8,300</b>	<b>(\$456,093)</b>	<b>(\$1,460,189)</b>	<b>\$ 265,684</b>
								84.8%	-0.7%	38.2%	122.2%	-22.2%
<b>\$ 52,905,769</b>	<b>\$ 53,679,039</b>	<b>\$ 55,355,779</b>		<b>GRAND TOTAL</b>	<b>\$ 57,945,055</b>	<b>\$ -</b>	<b>\$ 57,945,055</b>	<b>\$ 33,804,218</b>	<b>\$ 23,132,826</b>	<b>\$ 788,406</b>	<b>\$ 57,725,449</b>	<b>\$219,606</b>
								58.34%	39.92%	1.36%	99.62%	0.38%