Windsor Board of Education
Regular Meeting

Tuesday, April 21, 2026 7:00 PM

BOE Regular Meeting, Hybrid via Zoom and In-Person Join from PC, Mac, iPad, or Android: https://us06web.zoom.us/j/86255878721 Join via audio: +1 646 558 8656 +1 301 715 8592 Webinar ID: 862 5587 8721

601 Matianuck Avenue

Windsor, CT 06095

1. Call to Order, Pledge to the Flag, Moment of Silence
   Speaker(s): A. Taylor
2. Recognitions/Acknowledgements
   Speaker(s): A. Taylor
   - 2.a. Proclamation - Teacher Appreciation Week, May 4-8, 2026
     Speaker(s): A. Taylor
   - 2.b. Recognition - WHS Girls Flag Football Champions - 2025
     Speaker(s): T. Huff
   - 2.c. Recognition - WHS Boys Basketball Division II Champions
     Speaker(s): K. Smith
   - 2.d. Recognition - Poquonock Elementary School Literacy Programs "One School, One Book" and "ReadBowl"
     Speaker(s): J.Mihalko
3. Audience to Visitors
   Speaker(s): A. Taylor
4. Consent Agenda
   Speaker(s): A. Taylor
   - 4.a. Financial Report
     Speaker(s): D. Batchelder
   - 4.b. Enrollment Report
     Speaker(s): D. Batchelder
   - 4.c. Food Service Report
     Speaker(s): D. Batchelder
   - 4.d. Human Resources Report
     Speaker(s): D. Batchelder
5. Approval of Minutes
   Speaker(s): A. Taylor
   - 5.a. March 17, 2026 Regular Meeting
     Speaker(s): T. Zotter
   - 5.b. March 19, 2026 Policy Committee Meeting
     Speaker(s): T. Zotter
   - 5.c. March 31, 2026 Special Meeting
     Speaker(s): T. Zotter
6. Student Representative Report
   Speaker(s): A. Blume
7. Board of Education
   Speaker(s): A. Taylor
   - 7.a. President's Report
     Speaker(s): A. Taylor
   - 7.b. School Liaison Reports
     Speaker(s): A. Taylor
     - 7.b.1. Windsor High School
       Speaker(s): B. Jacobsen/N. Wolliston
     - 7.b.2. Sage Park Middle School
       Speaker(s): T. Zotter/P. Panos
     - 7.b.3. Clover Street School
       Speaker(s): L. Lockhart
     - 7.b.4. John F. Kennedy School
       Speaker(s): J. Madison
     - 7.b.5. Oliver Ellsworth School
       Speaker(s): M. Davis
     - 7.b.6. Poquonock School
       Speaker(s): J. Halek

7.c. Healthy Food Certification
Speaker(s): D. Batchelder

8. Acting Superintendent's Report
Speaker(s): N. Abdel-Hady

8.a. Set Last Day of School for 2025-2026
Speaker(s): N. Abdel-Hady

8.b. 2025-2026 Leader and Educators' Evaluation and Support Plan
Speaker(s): N. Abdel-Hady

8.c. Policy Adoption, 1st Reading
Speaker(s): N. Wolliston

8.c.1. Revised P/AR 5112 Admission to the Public Schools at or Before Age Five and Form 2
Speaker(s): N. Wolliston/N. Abdel-Hady

8.c.2. Revised P 5141.21 Administration of Student Medications in the Schools
Speaker(s): N. Wolliston/M. Cristofaro

8.c.3. Revised P 6142.1 Curricular Exemptions and Form 1
Speaker(s): N. Wolliston/N. Abdel-Hady

8.c.4. New P 6161 Library Collection Development and Maintenance, Library Displays and Programs, and Library Material Review and Reconsideration
Speaker(s): N. Wolliston/N. Abdel-Hady

8.c.5. New P 6170 Parental Access to Instructional Material
Speaker(s): N. Wolliston/N. Abdel-Hady

8.d. Recommended Non-Renewal of Teachers (Executive Session If Needed)
Speaker(s): D. Batchelder

9. Committee Reports
Speaker(s): A. Taylor

9.a. Curriculum Committee
Speaker(s): B. Jacobsen

9.b. Finance Committee
Speaker(s): L. Lockhart

9.c. Long-Range Planning Committee
Speaker(s): T. Zotter

9.d. Policy Committee
Speaker(s): N. Wolliston

10. Other Matters/Announcements/Regular BOE Meetings
Speaker(s): A. Taylor

10.a. Next BOE Regular Meeting is Tuesday, May 19, 2026, 7:00 PM, LPW, Board Room
Speaker(s): A. Taylor

11. Audience to Visitors
Speaker(s): A. Taylor

12. Adjournment
Speaker(s): A. Taylor

Proclamation Commemorating
Windsor Teacher Appreciation Week
May 4 through May 8, 2026

Let it be known by all citizens of Windsor, that

Whereas, Windsor's teachers are listeners, explorers, role models, motivators and mentors; and

Whereas, teachers are vital through their dedicated efforts to ensure our children learn what is needed to be successful in higher education, careers and life; and

Whereas, our teachers challenge and inspire students every day to change the world; and

Whereas, education is the pathway to a brighter and more prosperous future, and teachers prepare children for lifelong success; and

Whereas, the Windsor Board of Education appreciates and recognizes our teachers who shape the students of today into the leaders of tomorrow, inspire others to ascend into this honorable profession, and reaffirm our commitment to high-quality education that meets the needs of all students, and

Now, therefore, be it proclaimed on this the 21st day of April 2026…

That, the Windsor Board of Education hereby declares our appreciation to our teaching staff and proclaims the week of May 4th through May 8th as Windsor Teacher Appreciation Week.

Windsor Board of Education

Leonard O. Lockhart, Vice President
Paul J. Panos, Minority Leader
Jeremy C. Halek
Nathan G. Wolliston
Tracey E. Zotter, Secretary
Maxine N. Davis
Becky I. Jacobsen
James A. Madison

Ayana K. Taylor
President

Dr. Noha Abdel-Hady
Acting Superintendent of Schools

WINDSOR BOARD OF EDUCATION

AGENDA ITEM

For Consideration by the Board of Education at the Meeting of: April 21, 2026

Prepared By: Dr. Noha Abdel-Hady **Presented By:** T. Huff

Attachment: WHS Girls Flag Football Participation List - 2025

Subject: Recognition - WHS Girls Flag Football Champions - 2025

Background:

The WHS Girls Flag Football won the Central Connecticut Conference title in May of 2025.
The championship game was 18-0 against Southington. This group of students helped establish what is now the foundation of girls flag football at Windsor. Coach Huff received regional recognition. He was honored as the New York Giants Week 8 Coach of the Week, representing not only Connecticut, but the entire region.

Status: N/A

Recommendation: Informational Only

Recommended by the Superintendent: N. Abdel-Hady

Agenda Item # 2.b.

WHS Girls Flag Football
CCC Championship Team - 2025

Brianni Alfonso	Amani Edwards	Jeniya James
Kaitlyn Allen	Chrissy Francois	Brooklynn Joya
Isabelle Colon	Janae Gary	Kara Khan
Sakinah Cooper	Kaitlyn Gooding	Zoe Mercado
Seiko Cooper	Eniyah Gordon	Peyton Munroe
Mia Crespo	Syniah Harding	Brooklyn Smart
Mya Crespo	Kaiyah Hardy	Ezzarea Virruet
Anaya Davis	Genesis Zhispon Harry	Nykayla Wilkinson
	Taryn Harts	

Head Coach	Assistant Coach
Terrell Huff	Jerry Woodard

WINDSOR BOARD OF EDUCATION

AGENDA ITEM

For Consideration by the Board of Education at the Meeting of: April 21, 2026

Prepared By: Dr. Noha Abdel-Hady **Presented By:** K. Smith

Attachment: WHS Boys Basketball Division II Champions Participants

Subject: Recognition - WHS Boys Basketball Division II Champions

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Background:

The WHS Boys Basketball team won the CIAC Division II championship game against Bunnell 78-52 at Mohegan Sun Arena on March 22, 2026. Their season ended with only two losses. This marks their sixth championship win.

Status: N/A

Recommendation: Informational Only

Recommended by the Superintendent: N Abdel-Hady

Agenda Item # 2.C.

Windsor High School Boys Basketball
CIAC Division II Championship Team - 2026

Adam Afolabi	Missoni Brown	Ji Gary
Jamison Greenfield	Jeremiah Levitan	Charles Lewis
Willie Lockhart	Clifford Marrett	Ryan McDonald
Theodore Perkins	Liam Regis	Myles Rush
James Scott	Clayton Shufelt	Clinton Toomer
Alexander Weaver	Tristan Young	

Head Coach	Assistant Coaches
Ken Smith	Keyon Smith
	Dean Jones
	Melvin Haynes
	Gerald Joseph
	Greg Smith

WINDSOR BOARD OF EDUCATION

Agenda Item

For Consideration by the Board of Education at the Meeting of: April 21, 2026

Prepared By: Dr. Noha Abdel-Hady **Presented By:** Jay Mihalko

Subject: Poquonock Elementary School Literacy Programs "One School, One Book" and "ReadBowl"

Background:

During the 2025-2026 school year, Poquonock Elementary School has involved the staff, students, and families in two literacy programs "One School, One Book" and "ReadBowl". Both programs incentivize students to read both at home and at school. Through family engagement in reading, students learn the value of reading and good-natured competition. Last year, Poquonock Elementary School earned State Reading Champions in ReadBowl VIII.

Status: N/A

Recommendation: Informational Only

Recommended by the Superintendent: N Abdel-Hady

Agenda Item # 2.d.

WINDSOR BOARD OF EDUCATION

AGENDA ITEM

For Consideration by the Board of Education at the Meeting of: April 21, 2026

PREPARED BY: Danielle Batchelder

PRESENTED BY: Danielle Batchelder, Chief of Operations

ATTACHMENTS: March 31, 2026 Financial Report

SUBJECT: Financial Report

BACKGROUND:

A report of operating expenditures is prepared monthly for the Board of Education. The report details monthly and year-to-date expenditures for each site within Windsor Public Schools.

STATUS:

The attached report is for the month of March 2026

There were no inter-site transfers during the month.

RECOMMENDATION:

No action is necessary. The report is for information only.

The Secretary of the Board of Education should include the following in the minutes of this Board of Education meeting:

Expenditures for March 31, 2026	$ 6,401,983
Expenditures & Encumbrances through March 31, 2026	$61,006,976

Reviewed by: DB **Recommended by the Superintendent:** Mohahah

Agenda Item # 4.a.

	2025-2026 Budget	Expenditures YTD 3/31/26	Encumbrance	Balance 6/30/2026	% Balance
Instructional Services					
Clover Street School	50,170	24,640	3,528	22,002	**44%**
John F. Kennedy School	71,950	40,137	13,016	18,797	**26%**
Oliver Ellsworth School	74,230	35,003	9,142	30,085	**41%**
Poquonock School	56,800	30,643	10,338	15,819	**28%**
Sage Park Middle School	184,935	110,159	21,704	53,072	**29%**
Windsor High School	355,145	197,866	31,653	125,626	**35%**
Windsor High School Interscholastic Sports	260,000	251,635	8,186	179	**0%**
Athletic Coaches	336,000	237,505	0	98,495	**29%**
WHS Career & Technical Education	59,745	27,924	9,535	22,286	**37%**
Continuing Education	70,400	59,509	2,056	8,835	**13%**
Instructional Mgt. & Curriculum Developmen	469,649	382,549	5,889	81,211	**17%**
Magnet School Tuition	1,860,600	1,108,732	0	751,868	**40%**
Technology	1,677,761	1,279,662	221,142	176,957	**11%**
Total Instructional Services	**5,527,385**	**3,785,964**	**336,189**	**1,405,232**	**25%**
Education Support Services					
Pupil Personnel Services	316,350	193,478	23,323	99,549	**31%**
Special Education	83,450	53,700	8,199	21,551	**26%**
Special Education Tuition	6,779,140	3,357,981	89,315	3,331,844	**49%**
Policy & Planning	133,386	157,413	5,179	(29,206)	**-22%**
Employee Personnel Services	152,000	126,465	5,156	20,379	**13%**
Financial Management	270,840	152,520	44,217	74,103	**27%**
Financial Services	38,500	31,049	1,430	6,021	**16%**
Pupil Transportation & Safety	3,759,399	1,740,093	312,255	1,707,051	**45%**
Special Education Transportation	2,773,200	2,113,437	88,876	570,887	**21%**
Physical Plant Services	3,150,200	2,423,709	414,722	311,769	**10%**
Major Maintenance	423,000	253,146	64,959	104,895	**25%**
L.P. Wilson Center	281,500	165,930	113,560	2,010	**1%**
Benefits	14,638,875	8,077,127	182,319	6,379,429	**44%**
Certified Salaries	36,926,243	26,262,980	0	10,663,263	**29%**
Non-Certified Salaries	11,988,580	9,023,790	0	2,964,790	**25%**
Regular Ed Tutor Salaries	682,550	510,862	0	171,688	**25%**
Special Ed Tutor Salaries	512,940	321,494	0	191,446	**37%**
Substitute Salaries	781,586	585,908	0	195,678	**25%**
FRC & SEL	56,000	35,029	5,202	15,769	**28%**
Total Education Support Services	**83,747,739**	**55,586,111**	**1,358,712**	**26,802,916**	**32%**
Total All Sites	**$89,275,124**	**$59,372,075**	**$1,694,901**	**$28,208,148**	**32%**

WINDSOR BOARD OF EDUCATION

AGENDA ITEM

For Consideration by the Board of Education at the Meeting of: April 21, 2026

PREPARED BY: Jen Clarke, Registration Coordinator

PRESENTED BY: Danielle Batchelder, Chief of Operations

ATTACHMENTS: Student Enrollment Report & Recap

SUBJECT: Student Enrollment as of April 1, 2026

BACKGROUND:

Attached are the enrollment figures as of April 1, 2026. Mrs. Batchelder will answer any questions.

STATUS:

In prior BOE enrollment reports, the enrollment report grouped all students into one category labeled "Outside Placement/Private Placement (SPED)". Beginning in September 2016, the Out Placement/Private Placement (SPED) line was separated into two categories:

1. *Out of District Placement-Special Education students*
2. *Private Placement Special Education students*

Out of District - Special Education: Those students who are placed at a Connecticut State Department of Education (CSDE) approved private special education program as recommended by a planning and placement team (PPT) as part of a student's individualized education program (IEP). Additionally, this category may include a family who moves into Windsor with a child who has a disability who has already been placed in a private special education program and/or children who are placed in Windsor foster home(s) by the Department of Children and Families (DCF) and are already enrolled in a private special education program.

Private Placement - Special Education: Those students who have been identified special education through the planning and placement team (PPT) process that have been parentally placed at a non-public school located in Windsor (i.e., St. Gabriel, Trinity Christian, Madina Academy, Praise Power & Prayer, etc.).

RECOMMENDATION:

Informational

Reviewed by: _____ **Recommended by the Superintendent:** _____

Agenda Item # 4.b.

Windsor Public Schools
Student Enrollment Report
April 1, 2026

GRADE		Poquonock School	Clover Street School	Oliver Ellsworth School	John F. Kennedy School	Total
PreK		68		0		68
K		84		115		199
1		80		103		183
2		86		130		216
3			108		125	233
4			103		142	245
5			87		125	212
Subtotal K-5						1,288
Total		**318**	**298**	**348**	**392**	**1,356**

GRADE		Sage Park Middle School
6		251
7		232
8		247
Total		**730**

GRADE	Windsor High School
9	261
10	252
11	298
12	297
Total	**1,108**

District Wide Enrollment	**3,194**

Windsor Public Schools
Student Enrollment Report
April 1, 2026

Enrollment in Windsor Public Schools

Grades PreK - 5	1,356
Grades 6-8	730
Grades 9-12	1,108
Total District Enrollment	**3,194**

Windsor Students not in District Schools

Out of District Placements (SPED)	29
Private Schools (St.Gabriels, Trinity Christian, Medina Academy; Praise, Power&Prayer)	57
CREC Montessori Hartford	10
CREC Metropolitan Learning Center (MLC)	42
CREC Miscellaneous Magnet Schools	277
Hartford Host Magnet Schools	187
Miscellaneous Magnet Schools (LEARN, Goodwin College & Global Experience)	22
A.I. Prince Technical High School	21
Howard Cheney Technical High School	11
	656
Total Students	**3,850**

ENROLLMENT REPORT 2025-2026
POQUONOCK SCHOOL

Room #	Teacher	Grade	Projected	1-Sept	1-Oct	1-Nov	1-Dec	1-Jan	1-Feb	1-Mar	1-Apr	1-May	1-Jun
		Kindergarten											
23	B. Brown				14	14	15	15	15	15	15		
2	R. Brown				14	14	14	14	14	14	14		
24	Kowalchik				14	15	14	14	13	13	13		
22	Roche				14	12	11	11	11	11	11		
3	Scott				14	14	14	14	14	14	13		
26	Scerra				14	15	15	15	15	15	15		
ABA	Ellis				5	3	3	3	3	3	3		
		Total	**72**	**0**	**89**	**87**	**86**	**86**	**85**	**85**	**84**	**0**	**0**
		Grade 1											
17	Achim				15	15	15	15	15	16	16		
11	Delsky				14	14	13	13	14	13	13		
14	Cabral				14	14	14	14	13	14	14		
16	Parker				15	15	16	17	17	17	17		
18	Tweeddale				15	15	16	16	16	16	16		
ABA	Ellis				4	4	4	4	4	4	4		
		Total	**81**	**0**	**77**	**77**	**78**	**79**	**79**	**80**	**80**	**0**	**0**
		Grade 2											
18	Alzamora				18	18	18	18	18	18	18		
12	Kowaleski				18	18	18	18	18	18	18		
1	McCann				17	18	17	16	16	16	16		
13	Stole				17	17	16	17	17	17	17		
15	Velez				17	17	17	17	16	17	17		
ABA	Ellis				0	0	0	0	0	0	0		
		Total	**109**	**0**	**87**	**88**	**86**	**86**	**85**	**86**	**86**	**0**	**0**
	Sped & Peer				55	61	61	59	63	63	68		
		Total	**96**	**0**	**55**	**61**	**61**	**59**	**63**	**63**	**68**	**0**	**0**
	Poqunonock	**Totals**	**358**	**0**	**308**	**313**	**311**	**310**	**312**	**314**	**318**	**0**	**0**

ENROLLMENT REPORT 2025-2026
OLIVER ELLSWORTH SCHOOL

Room #	Teacher	Grade	Projected	1-Sept	1-Oct	1-Nov	1-Dec	1-Jan	1-Feb	1-Mar	1-Apr	1-May	1-Jun
		Kindergarten											
19	Allen				14	14	15	15	15	15	14		
20	Klescezeski				14	14	13	14	14	14	14		
21	Moreno				14	14	14	14	14	14	14		
22	Bishop				15	15	15	15	15	15	15		
23	Heacock				14	14	14	15	15	15	15		
24	Stevens				13	13	14	14	14	14	13		
25	Chapple				14	14	14	14	14	14	14		
26	Nash				14	14	14	14	14	14	14		
29	Waller (ABA)				2	2	2	2	2	2	2		
		Total	**113**	**0**	**114**	**114**	**115**	**117**	**117**	**117**	**115**	**0**	**0**
		Grade 1											
10	Strickland				14	14	14	14	14	14	14		
11	Adamski				14	14	14	14	15	14	14		
12	Lawrence				16	16	16	15	15	15	15		
8	Billington				15	15	14	13	13	12	13		
15	LePage				16	16	15	15	15	15	15		
16	Butterick				15	15	15	15	15	15	15		
17	Gonzalez				14	14	14	15	15	15	15		
29	Waller (ABA)				2	2	2	2	2	2	2		
		Total	**100**	**0**	**106**	**106**	**104**	**103**	**104**	**102**	**103**	**0**	**0**
		Grade 2											
1	Mayo				21	21	20	21	22	22	22		
13	Barton				22	22	22	22	22	22	22		
3	McDonald				21	21	21	21	21	22	22		
5	Montesione				22	22	22	22	22	21	21		
17	Dezione				20	20	20	20	20	19	18		
7	Ozenne				21	21	21	20	20	20	20		
29	Waller (ABA)				4	4	4	4	4	5	5		
		Total	**115**	**0**	**131**	**131**	**130**	**130**	**131**	**131**	**130**	**0**	**0**
	Sped & Peers				0								
		Total	**38**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**
Oliver Ellsworth		**Totals**	**366**	**0**	**351**	**351**	**349**	**350**	**352**	**350**	**348**	**0**	**0**

ENROLLMENT REPORT 2025-2026
Clover Street School

Room #	Teacher	Grade	Projected	1-Sept	1-Oct	1-Nov	1-Dec	1-Jan	1-Feb	1-Mar	1-Apr	1-May	1-Jun
		Grade 3											
25	Burnham				19	20	20	20	20	20	20		
27	Cabral				16	15	13	13	13	14	14		
8	Driscoll				18	18	18	18	18	18	18		
26	Farrell				16	16	17	17	17	17	17		
10	Rivers				19	19	19	19	19	19	19		
11	Sanchez				19	20	20	20	20	20	20		
		Total	**90**	**0**	**107**	**108**	**107**	**107**	**107**	**108**	**108**	**0**	**0**
		Grade 4											
19	Comer				21	21	21	21	19	20	21		
17	Junious				19	19	19	20	20	20	20		
16	Murray				20	20	21	21	21	21	21		
18	Sumner				21	21	21	21	21	21	21		
24	Steele				20	20	21	21	20	20	20		
		Total	**93**	**0**	**101**	**101**	**103**	**104**	**101**	**102**	**103**	**0**	**0**
		Grade 5											
15	Grimes				22	22	22	23	23	23	23		
13	Nowsch				22	22	22	22	21	22	22		
14	Jerram				20	20	21	20	21	21	21		
21	Margadonna				21	21	22	21	21	21	21		
		Total	**95**	**0**	**85**	**85**	**87**	**86**	**86**	**87**	**87**	**0**	**0**
	Clover	**Totals**	**278**	**0**	**293**	**294**	**297**	**297**	**294**	**297**	**298**	**0**	**0**

ENROLLMENT REPORT 2025-2026
JF KENNEDY SCHOOL

Room #	Teacher	Grade	Projected	1-Sept	1-Oct	1-Nov	1-Dec	1-Jan	1-Feb	1-Mar	1-Apr	1-May	1-Jun
		Grade 3											
101	Ponzini				20	19	20	21	20	21	21		
102	Nguyen				21	21	21	21	21	21	21		
103	Lamoureux				21	21	21	21	21	21	21		
104	Mendola				20	21	21	21	21	21	21		
105	May				21	21	21	21	21	21	21		
106	Quintanilla				21	21	21	21	21	20	20		
		Total	**134**	**0**	**124**	**124**	**125**	**126**	**125**	**125**	**125**	**0**	**0**
		Grade 4											
107	Gilligan				22	21	20	20	21	21	20		
108	Coffey				21	20	21	20	21	21	20		
109	Jones				22	22	22	22	21	21	21		
110	Estelle				21	21	19	19	20	20	20		
112	Kingsley				22	22	21	21	21	21	21		
114	Freitas				22	22	22	22	20	20	20		
116	DaCosta				22	22	21	21	21	21	20		
		Total	**146**	**0**	**152**	**150**	**146**	**145**	**145**	**145**	**142**	**0**	**0**
		Grade 5											
119	Johnson				22	22	21	21	21	21	20		
120	Carpenter				21	21	20	20	20	20	20		
124	Lam				23	23	23	23	23	23	23		
125	Mitchell				19	19	19	19	19	18	19		
127	Bell				22	21	21	22	21	21	21		
128	Everett				23	23	23	22	22	22	22		
		Total	**130**	**0**	**130**	**129**	**127**	**127**	**126**	**125**	**125**	**0**	**0**
John F. Kennedy		**Totals**	**410**	**0**	**406**	**403**	**398**	**398**	**396**	**395**	**392**	**0**	**0**

ENROLLMENT REPORT 2025-2026
Sage Park Middle School

		Projected	1-Sept	1-Oct	1-Nov	1-Dec	1-Jan	1-Feb	1-Mar	1-Apr	1-May	1-Jun
Grade 6												
House 1				121	121	121	122	123	123	125		
House 2				127	127	127	127	125	127	126		
	Total	**237**	**0**	**248**	**248**	**248**	**249**	**248**	**250**	**251**	**0**	**0**
Grade 7												
House 3				117	118	119	119	118	118	116		
House 4				119	118	118	116	115	117	116		
	Total	**246**	**0**	**236**	**236**	**237**	**235**	**233**	**235**	**232**	**0**	**0**
Grade 8												
House 5				121	122	122	122	121	121	121		
House 6				124	125	125	125	126	126	126		
	Total	**256**	**0**	**245**	**247**	**247**	**247**	**247**	**247**	**247**	**0**	**0**
Sage Park	**Totals**	**739**	**0**	**729**	**731**	**732**	**731**	**728**	**732**	**730**	**0**	**0**

ENROLLMENT REPORT 2025-2026
Windsor High School

	Projected	1-Sept	1-Oct	1-Nov	1-Dec	1-Jan	1-Feb	1-Mar	1-Apr	1-May	1-Jun
Grade 9	**283**		280	282	283	283	263	263	261		
Grade 10	**288**		249	248	248	248	250	250	252		
Grade 11	**270**		306	304	300	300	296	299	298		
Grade 12	**273**		273	276	275	276	296	296	297		
Windsor High Total	**1,114**	**0**	**1,108**	**1,110**	**1,106**	**1,107**	**1,105**	**1,108**	**1,108**	**0**	**0**

WINDSOR BOARD OF EDUCATION
AGENDA ITEM

For Consideration by the Board of Education at the Meeting of: Tuesday, April 21, 2026

Prepared By: Patricia Patton **Presented By:** Danielle Batchelder

Attachments: Cafeteria Operations – March 2026

Subject: Food Service Financial Report

Background: The Windsor School Food Service participates in the National School Lunch Program at each of our school facilities. We also participate in the National School Breakfast Program at our four elementary schools, Sage Park Middle School and Windsor High School. We operated our Summer Food Service Program at John Fitch Park and Sharshon Park during summer break serving lunch. We are complying with the Healthy Food Certification again this year to send a consistent message to our students in keeping with our wellness policies.

Our annual goal is to operate with a small reserve account to offset unanticipated needs and to increase participation from students and staff in all our programs.

A monthly financial report is presented to the Board of Education. This report includes sales and financial information for the current period.

Status: Financial Report for March 2026

Recommendation: Informational Only

Reviewed by: MB **Recommended by the Superintendent:** [signature]

Agenda Item # 4.C.

WINDSOR SCHOOL FOOD SERVICE
FINANCIAL STATEMENT
MARCH 2026

REVENUE	**March 2026**	**7/1/25 - YTD**	**March 2025**	**7/1/24-YTD**
SALES	$85,278.30	$598,701.07	$84,369.50	$533,038.89
REIMBURSEMENTS - STATE	15,550.00	15,550.00	16,736.00	24,841.00
Federial Reimbursenment	138,916.92	899,303.18	142,390.45	909,411.10
CLOC	27,222.00	138,233.00	10,908.00	155,824.00
MISC. (Rebates & Grants)	0.00	5,150.00	0.00	5,429.99
9 Cents Certification	3,549.42	22,806.27	3,665.70	23,856.39
REVENUE TOTALS	**$270,516.64**	**$1,679,743.52**	**$258,069.65**	**$1,652,401.37**
Refunds				$2,919.60
TOTAL REVENUE	**$270,516.64**	**$1,679,743.52**	**$172,701.58**	**$1,649,481.77**
EXPENSES				
WAGES	$60,306.55	$574,549.04	$73,731.41	$578,898.72
PAYROLL TAXES	4,285.60	40,429.32	5,640.45	52,172.30
BENEFITS	13,240.23	98,093.91	10,664.06	72,792.99
FOOD/MILK/ICE CREAM	114,368.02	996,129.16	134,870.12	870,782.28
PAPER	3,746.45	32,005.70	6,420.74	28,017.67
TRUCK	171.92	948.51	258.00	1,147.02
SUPPLIES	1,663.32	21,435.76	9,645.60	12,945.90
EQUIPMENT	62,321.84	244,591.29	70,776.81	376,296.36
SERVICES	11,968.08	37,739.02	9,163.40	144,749.25
EXPENSE TOTALS	**$272,072.01**	**$2,045,921.71**	**$321,170.59**	**$2,137,802.49**
Net other income				
NET INCOME	**-$1,555.37**	**-$366,178.19**	**-$148,469.01**	**-$488,320.72**
INVENTORY	**$17,078.15**			**$10,145.89**
OPENING BALANCE 7/1	$1,055,860.38			$1,985,269.08
COMPUTED OPERATING POSITION		**$689,682.19**		**$1,510,013.85**

WINDSOR BOARD OF EDUCATION

AGENDA ITEM

For Consideration by the Board of Education at the Meeting of: April 21, 2026

PREPARED BY: Katherine Zager, Human Resource Manager

PRESENTED BY: Danielle Batchelder, Chief of Operations

ATTACHMENTS: Human Resources Report

SUBJECT: Human Resources Report for March 1, 2026 – March 31, 2026

BACKGROUND:

Attached are the personnel actions from March 1, 2026 – March 31, 2026. Mrs. Batchelder will answer any questions.

RECOMMENDATION:

Informational

Reviewed by: _____ **Recommended by the Superintendent:** _____

Agenda Item # 4.d.

Personnel Actions March 1, 2026 - March 31, 2026

NON-CERTIFIED NEW HIRES / REAPPOINTMENTS

Name	Assignment	School
Jermaine Jenkins	Paraeducator	Oliver Ellsworth
Rija Khan	Paraeducator (Temporary)	Oliver Ellsworth
Shaniah Isaacs	Paraeducator	Sage Park
Janet Quintas	Part-Time Food Service General Worker	Windsor High
Connor Johnson	Assistant Baseball Coach	Windsor High
Sarah Connelly Zitney	F/T Structured Lit. Tutor (IDEA Grant Funde	LPW/Districtwide

CERTIFIED NEW HIRES / REAPPOINTMENTS

Name	Assignment	School	Band/Step
Julie Vo	Graphic Design Teacher	Windsor High	TMA Step 6

NON-CERTIFIED REASSIGNMENTS / TRANSFERS

Name	From	To
Yuri Mejias	Custodian II (Evenings) at WHS	Custodian II (Evenings) at Clover
Jennifer Shufelt	Paraeducator at Oliver Ellsworth	SEL Specialist at Oliver Ellsworth
Damaris Ruiz	Admin. Assist. to Assistant Principal at Sage	Senior Admin. Assist. to PSES Director

CERTIFIED REASSIGNMENTS / TRANSFERS

Name	From	To
N/A	N/A	N/A

RESIGNATIONS / SEPARATIONS

Name	Assignment	School
Christopher Loureiro	Assistant Principal	Windsor High
Stacy Viegas	Graphic Design Teacher	Windsor High
Barbara Lester	School Social Worker (0.6 FTE)	LPW (SPARK)
Manuel Navarro	Custodian II (Evenings)	Clover
Paulette Collins	Paraeducator	Oliver Ellsworth
Jermaine Jenkins	Paraeducator	Oliver Ellsworth
Vernon Kennedy	Head Wrestling Coach	Windsor High
Aziz Harram	Paraeducator	Windsor High
George Serfass	Assistant Baseball Coach	Windsor High
Janet Quintas	Part-Time Food Service General Worker	Windsor High
Matthew Fraczek	Maintenance Worker (Licensed)	LPW/Districtwide

RETIREMENTS

Name	Assignment	School
N/A	N/A	N/A

Windsor Board of Education
Regular Meeting
Unapproved Minutes

Tuesday, March 17, 2026 7:00 PM
601 Matianuck Avenue
Windsor, CT 06095

The following are the unapproved minutes of the Tuesday, March 17, 2026 Regular Meeting. Any additions or corrections will be made at a future meeting.

Ms. Maxine Davis:	Present
Mr. Jeremy Halek:	Present
Ms. Becky Jacobsen:	Present
Mr. Leonard Lockhart:	Present
Mr. James Madison:	Present
Mr. Paul Panos:	Present
Ms. Ayana Taylor:	Present
Mr. Nathan Wolliston:	Present
Ms. Tracey Zotter:	Present

All board members were present in the board room with the exception of Mr. Halek who attended virtually.

1. Call to Order, Pledge to the Flag, Moment of Silence
   The meeting was called to order at 7:05 PM with the Pledge to the Flag and a Moment of Silence. Also in attendance was Acting Superintendent Dr. Noha Abdel-Hady, Chief of Operations Danielle Batchelder, and Director of Pupil and Special Education Services Mary Cristofaro.

2. Recognitions/Acknowledgements

a. Recognition—New BOE Student Representative - Andrew Blume
   Dr. Abdel-Hady introduced the Spring Student Representative, Andrew Blume, on behalf of Windsor High School Principal Dr. Breon Parker.

b. Recognition - Girls Class L Indoor Track and Field Champions
   Dr. Abdel-Hady introduced the Girls Class L Indoor Track and Field Champions for the 25-26 school year. They competed against 20 teams to win their 10th championship in a row. Coach Kearse introduced the athletes who were able to attend.

3. Audience to Visitors
   Joseph Macary, 30 Park Street, Vernon — Mr. Macary spoke as Superintendent of Schools for the Vernon school district. He spoke incredibly highly of Dr. Abdel-Hady and her accomplishments in her time in Windsor.

   Nuchette Black-Burke, Windsor — Ms. Black-Burke spoke about the variety of relationships she has had with Dr. Abdel-Hady over the years, as a parent, BOE member, Mayor, and community member. She spoke of how Dr. Abdel-Hady is a visionary, champion, and guide for the district.

   Danielle Batchelder, Windsor — Ms. Batchelder stated that she has never worked for as amazing an individual as Dr. Abdel-Hady.

   Amanda Beane, 103 Pleasant Street, Windsor - Ms. Beane spoke about the positive impact that Dr. Abdel-Hady has been in the district and that she is the right person for the superintendent position.

   After Audience to Visitors closed, the board voted to move agenda item 7.b. to immediately before the Consent Agenda.

Move the Board of Education move agenda item 7.b. Superintendent Appointment to after item 3. Audience to Visitors. This motion, made by Mr. Leonard Lockhart and seconded by Mr. Paul Panos, Passed.
Yes: 9, No: 0

4. Consent Agenda
   a. Financial Report
   b. Enrollment Report
   c. Food Service Report
   d. Human Resources Report

   Move the Board of Education approve consent agenda items 4a. Financial Report, 4b. Enrollment Report, 4c. Food Service Report, 4d. Human Resources Report. This motion, made by Mr. Leonard Lockhart and seconded by Mr. Paul Panos, Passed.
   Yes: 9, No: 0

5. Approval of Minutes
   a. February 18, 2026 Regular Meeting
   b. March 12, 2026 Special Meeting

   Move the Board of Education approve the minutes of the February 18, 2026 Regular Meeting, the March 12, 2026 Special Meeting. This motion, made by Ms. Tracey Zotter and seconded by Mr. Paul Panos, Passed.
   Yes: 9, No: 0

6. Student Representative Report
   Mr. Blume gave updates on the end of winter sports and the beginning of spring sports. He also stated that the robotics team recently placed 5th in the state level competition. He attended CABE Day on the Hill where, as Ms. Taylor explained, he spoke in support of a bill which would count sports toward gym credit. He announced that an Artist Showcase for recording tech would take place at Windsor High School. He explained how successful the Sustainable Agriculture class has been and the volume of produce that has been grown. Testing will be held soon, so he gave an overview of the testing schedule.

   Several board members welcomed him to the position of Student Representative and said he did a good job.

   Mr. Halek requested that Mr. Blume share with his classmates that the recent protest was in fact disruptive and was therefore not a protected free speech activity.

7. Board of Education

a. President's Report
   Ms. Taylor spoke about the various activities she had participated in throughout the district. These events ranged from being a guest reader for Women's History Month, being on a panel at JFK, and attending the Poquonock Student Celebration and Black History Month assembly. She also attended the Shad Derby Gala and the Project Graduation fund-raiser.

   Mr. Wolliston left the meeting at 8:21 PM and returned at 8:24 PM.

b. Superintendent Appointment (Action Anticipated)

   For continuity, this agenda item was addressed prior to the consent agenda, item 4.

   Move that in accordance with Connecticut General Statues, Section 10-157, the Board of Education hereby offers Dr. Noha Abdel-Hady a three year contract of employment commencing July 1, 2026 through June 30, 2029 to serve as Superintendent of Schools for the Windsor Public Schools. This motion, made by Mr. Leonard Lockhart and seconded by Mr. Paul Panos, Passed.
   Yes: 9, No: 0

   The following is the roll call vote for the appointment of Dr. Abdel-Hady as Superintendent.

   Roll Call:
   Maxine Davis - yes
   Jeremy Halek - yes

Becky Jacobsen - yes
Leonard Lockhart - yes
James Madison - yes
Paul Panos - yes
Ayana Taylor - yes
Nathan Wolliston - yes
Tracey Zotter - yes
Yes: 9, No: 0

All board members spoke in support of appointing Dr. Abdel-Hady as the next Superintendent of Windsor Public Schools.

Move the Board of Education to authorize its President to execute this contract with Dr. Hady on behalf of the Board. This motion, made by Mr. Leonard Lockhart and seconded by Mr. Paul Panos, Passed.
Ms. Maxine Davis: No, Mr. Jeremy Halek: No, Mr. James Madison: No, Mr. Paul Panos: No, Ms. Becky Jacobsen: Yes, Mr. Leonard Lockhart: Yes, Ms. Ayana Taylor: Yes, Mr. Nathan Wolliston: Yes, Ms. Tracey Zotter: Yes
Yes: 5, No: 4

Roll Call for Main Motion:
Maxine Davis - no
Jeremy Halek - no
Becky Jacobsen - yes
Leonard Lockhart - yes
James Madison - no
Paul Panos - no
Ayana Taylor - yes
Nathan Wolliston - yes
Tracey Zotter - yes
Yes: 5, No: 4

Discussion regarding the second motion, authorization of the BOE President to execute the contract included:

Concerns that all sides will not be represented and that there needs to be additional review of the contract materials by all board members. It was stated that this was no reflection on Dr. Abdel-Hady and her expertise.

Move the Board of Education to authorize its President to execute this contract with Dr. Hady on behalf of the Board and that at least one executive session is needed prior to the April Regular meeting to resolve the contract. This motion, made by Mr. James Madison and seconded by Mr. Jeremy Halek, Failed.
Ms. Becky Jacobsen: No, Mr. Leonard Lockhart: No, Ms. Ayana Taylor: No, Mr. Nathan Wolliston: No, Ms. Tracey Zotter: No, Ms. Maxine Davis: Yes, Mr. Jeremy Halek: Yes, Mr. James Madison: Yes, Mr. Paul Panos: Yes
Yes: 4, No: 5

Roll Call for Subsidiary Motion:

Maxine Davis - yes
Jeremy Halek - yes
Becky Jacobsen - no
Leonard Lockhart - no
James Madison - yes
Paul Panos - yes
Ayana Taylor - no
Nathan Wolliston - no
Tracey Zotter - no
Yes: 4, No: 5

c. Revised Bylaw 9325.2 Order of Business (Action Anticipated)
There was discussion regarding the exact purpose of changing the wording of the bylaw. There was also a numbering error on the posted bylaw which was discussed as part of the revision.

Move the Board of Education approve the Revised Bylaw 9325.2 Order of Business as a 1st reading, waiving the 2nd reading, and approving the bylaw for immediate use and distribution. This motion, made by Mr. Leonard Lockhart and seconded by Mr. Paul Panos, Withdrawn.

Move the Board of Education approve the Revised Bylaw 9325.2 Order of Business. The numbering will be corrected to move the liaison reports from the first number 8 into a new paragraph B, renumbering the second number 8 as 9 and so forth. Then adding a paragraph B stating that the liaison reports may appear as routine matter as needed. Approve as a 1st reading, waiving the 2nd reading, and approving the bylaw for immediate use and distribution. This motion, made by Mr. Leonard Lockhart and seconded by Mr. Paul Panos, Passed.
Yes: 9, No: 0

8. Acting Superintendent's Report
Dr. Abdel-Hady began by expressing her appreciation to the board, staff, community, and colleagues who have shown support for her appointment as Superintendent. She thanked her family for making her the person she is and supporting her through all of her education and career.

She announced that March is Board Appreciation month and shared that a portion of the gifts to the board were created by the CBTA program No Limits.

Registration for the 26-27 school year is open as well as enrollment for the Summer Treehouse program. Schools began celebrating National SEL Day in all buildings, focusing on the 4C's. Thirteen student athletes were recognized by the Connecticut High School Association for their achievement in their respective track and field events. She reminded the community about the next Coffee Talk events as well as the upcoming no-school dates. Next week Monday, the second annual Transition Fair will be held at the LP Wilson gymnasium.

9. Committee Reports
a. Finance Committee
Mr. Lockhart said that the date of the presentation of the BOE budget was still to be determined.

b. Joint BOE/Town Council Committee
Ms. Zotter reported that at the March 10, 2026 Joint BOE and Town Council Committee meeting, approval was given to begin the process of obtaining quotes not only for the elementary schools, but for all schools to determine their future suitablility. Dr. Abdel-Hady will be working with the Town Manager to make arrangements. This committee will be meeting quarterly.

10. Other Matters/Announcements/Regular BOE Meetings
   a. Next BOE Regular Meeting is Tuesday, April 21, 2026, 7:00 PM, LPW, Board Room
   b. BOE Policy Committee Meeting, Thursday, March 19, 2026, 5:30 PM, Virtual

Mr. Wollliston said his birthday would be the same day as the April regular meeting.

Mr. Lockhart said that he has been very busy recently, including being a guest reader at Clover in his grandson's class.

Mr. Halek announced the birth of his daughter.

Mr. Madison said he was not surprised by Dr. Abdel-Hady's achievements.

Ms. Taylor expressed her congratulations to Mr. Halek's family.

11. Audience to Visitors
There were no speakers.

12. Adjournment
Move to adjourn at 9:01 PM. This motion, made by Mr. Leonard Lockhart and seconded by Mr. Paul Panos, Passed.
Yes: 9, No: 0

_____

Tracey Zotter, Secretary
Windsor Board of Education

Windsor Board of Education
Policy Committee Meeting – Virtual
Unapproved Minutes

Thursday, March 19, 2026 5:30 PM
Windsor, CT 06095

The following are the unapproved minutes of the Thursday, March 19, 2026 Policy Committee Meeting. Any additions or corrections will be made at a future meeting.

Mr. Leonard Lockhart: Present

Mr. James Madison: Present

Mr. Nathan Wolliston: Present

Attendance was taken at 5:31 PM.

1. Call to Order, Pledge to the Flag, Moment of Silence

   The meeting was called to order by committee chair Nathan Wolliston at 5:31 PM with the Pledge to the Flag and a Moment of Silence. Also in attendance was Acting Superintendent Dr. Noha Abdel-Hady, Chief of Operations Danielle Batchelder, Director of Pupil and Special Education Services Mary Cristofaro, and Board President Ayana Taylor as Ex Officio.

2. Audience to Visitors

   There were no speakers for Audience to Visitors.

3. Revised P/AR 5112 Admission to the Public Schools at or Before Age Five and Form 2

   Dr. Abdel-Hady reviewed the revisions to the policy, administrative regulation, and form as required by the emergency legislative update from the State earlier this month.

4. Revised P 5141.21 Administration of Student Medications in the Schools

   Ms. Cristofaro reviewed the revisions to the policy as required by state law.

5. Revised P 6142.1 Curricular Exemptions and Form 1

   Dr. Abdel-Hady reviewed the revisions to the policy as required by state law.

6. New P 6161 Library Collection Development and Maintenance, Library Displays and Programs, and Library Material Review and Reconsideration

   Dr. Abdel-Hady reviewed the new policy as required by state law. She clarified the review process followed when an individual with a vested interest submits a request for reconsideration of library materials.

7. New P 6170 Parental Access to Instructional Material

   Dr. Abdel-Hady reviewed the new policy as required by state law.

8. Adjournment

   Prior to adjournment, Mr. Lockhart confirmed with Mr. Madison that they will present the policies to their caucuses with the recommendation to approve as a 1st reading, and waiving the 2nd reading, as all policies presented were required by state law. The committee came to a general consensus to move all presented policies to the April regular BOE meeting.

   Move to adjourn at 5:52 PM. This motion, made by Mr. Leonard Lockhart and seconded by Mr. James Madison, Passed. Yes: 3, No: 0

_____
Tracey Zotter, Secretary
Windsor Board of Education

Windsor Board of Education
BOE Special Meeting – Hybrid via Zoom and In-Person
Unapproved Minutes

Tuesday, March 31, 2026 7:00 PM
601 Matianuck Avenue
Windsor, CT 06095

The following are the unapproved minutes of the Tuesday, March 31, 2026 BOE Special Meeting. Any additions or corrections will be made at a future meeting.

Ms. Maxine Davis:	Present
Mr. Jeremy Halek:	Present
Ms. Becky Jacobsen:	Absent
Mr. Leonard Lockhart:	Present
Mr. James Madison:	Present
Mr. Paul Panos:	Present
Ms. Ayana Taylor:	Present
Mr. Nathan Wolliston:	Absent
Ms. Tracey Zotter:	Present

Mr. Wolliston arrived at 7:09 PM. All board members were present in the board room.

Mr. Nathan Wolliston: Present

1. Call to Order, Pledge to the Flag, Moment of Silence
   The meeting was called to order at 7:08 PM with the Pledge to the Flag and a Moment of Silence. Also in attendance was Acting Superintendent Dr. Noha Abdel-Hady.

2. Audience to Visitors
   There were no speakers.

3. Executive Session Regarding Contract Negotiations with Incumbent Superintendent
   Move the Board of Education enter into executive session for the purpose of negotiating the contract for the superintendency with Dr. Abdel-Hady. They will invite the incumbent Superintendent Dr. Noha Abdel-Hady to be part of the discussion, excusing Dr. Noha Abdel-Hady during deliberations. This motion, made by Mr. Leonard Lockhart and seconded by Mr. Paul Panos, Passed.
   Yes: 8, No: 0

   The board entered into Executive Session at 7:10 PM and returned to open session at 9:09 PM. There was no discussion following the Executive Session.

4. Announcements
   Mr. Halek reminded the community about the Poquonock School egg hunt scheduled for Friday, April 3. There will be a special visit by the Easter Bunny.

   Ms. Davis congratulated Mr. Halek's recognition as Windsor Republican of the Year by the Republican Town Committee.

   Ms. Taylor congratulated Team Paragon on their undefeated win at the 2026 NE District Hartford event last weekend.

5. Adjournment
   Move to adjourn at 9:11 PM. This motion, made by Mr. Leonard Lockhart and seconded by Mr. Paul Panos, Passed.
   Yes: 8, No: 0

_____

Tracey Zotter, Secretary
Windsor Board of Education

WINDSOR BOARD OF EDUCATION
AGENDA ITEM

For Consideration by the Board of Education at the Meeting of: April 21, 2026

Prepared By: Danielle Batchelder **Presented by:** Danielle Batchelder

Attachments: CSDE Operational Memorandum

Subject: Healthy Food Certification (Section 10-215f of the CT General Statutes)

BACKGROUND:

Public Act 06-63* *An Act Concerning Healthy Food and Beverages in Schools* became effective July 1, 2006. Compliance with Section 1, "Requirement for Beverages," is required. Section 3, "Optional Healthy Food Certification," is optional. The Windsor Public Schools chose to comply with Section. 3. Compliance with the Optional Healthy Food Certification enabled the District to receive an additional ten cents per student meal from the state. The BOE had to have adopted a Wellness Policy, which it has.

STATUS:

The Windsor Public Schools has successfully completed eighteen years of the Healthy Food Certification. In order to receive the supplemental meal (10 cents) reimbursement for the 2026-27 school year, the Board of Education is required to certify compliance with the Act.

RECOMMENDATION:

That the Board of Education accepts the Healthy Food Certification program (Section 10-215f of the Connecticut General Statutes). The following motions are needed:

Motion 1:
Pursuant to C.G.S. Section 10-215f, the Windsor Public School's Board of Education certifies that all food items offered for sale to students in the schools under its jurisdiction, and not exempted from the Connecticut Nutrition Standards published by the State of Connecticut State Department of Education, will comply with the Connecticut Nutrition Standards during the period of July 1, 2026, through June 30, 2027. This certification shall include all food offered for sale to students separately from reimbursable meals at all times and from all sources, including but not limited to, school stores, vending machines, school cafeterias, and any fundraising activities on school premises sponsored by the school or non-school organizations and groups.

Motion 2:
The Windsor Board of Education or governing authority will allow the sale to students of food items that do not meet the Connecticut Nutritional Standards and beverages not listed in Section 10-221 q of the Connecticut General Statutes provided that the following conditions are met:

1. the sale is in connection with an event occurring after the end of the regular school day or on the weekend;
2. the sale is at the location of the event; and
3. the food and beverage items are not sold from a vending machine or school store.

An "event" is an occurrence that involves more than just a regularly scheduled practice, meeting, or extracurricular activity.
The "regular school day" is the period from midnight before to 30 minutes after the end of the official school day.
"Location" means where the event is being held and must be the same place as the food and beverage sales.

Reviewed by: _____ **Recommended by the Superintendent:** _____

Agenda Item # 7.C.

memo

Windsor Public Schools Board of Education Vote concerning Healthy Food Certification and Food & Beverage Exemptions

To: Danielle Batchelder

Director of Business Services

From: Patricia Patton

Food Services Director

Date: Tuesday April 21, 2026

Exact Language for both Motions

Pursuant to C.G.S. Section 10-215F, the Windsor Public School's board of education certifies that all food items offered for sale to students in the schools under its jurisdiction, and not exempted from the Connecticut Nutrition Standards published by the Connecticut State Department of Education, will comply with the Connecticut Nutrition Standards during the period of July 1, 2026 through June 30, 2027. This certification shall include all food offered for sale to students separately from reimbursable meals at all times and from all sources, including but not limited to, school stores, vending machines, school cafeterias, and any fundraising activities on school premises sponsored by the school or by non-school organization and groups.

Food and beverage exemptions: The Windsor Board of Education or governing authority will allow the sale to students of food items that do not meet the Connecticut Nutrition Standards and beverages not listed in Section 10-221q of the Connecticut General Statutes provided that the following conditions are met: 1) the sale is in connection with an event occurring after the end of the regular school day or on the weekend; 2) the sale is at the location of the event; and 3) the food and beverage items are not sold from a vending machine or school store. An "event" is an occurrence that involves more than just a regularly scheduled practice, meeting, or extracurricular activity. For example, soccer games, school plays, and interscholastic debates are events but soccer practices, play rehearsals, and debate team meetings are not. The "regular school day" is the period from midnight before to 30 minutes after the end of the official school day. "Location" means where the event is being held and must be the same place as the food and beverage sales.

- An "event" is an occurrence that involves more than just a regularly scheduled practice, meeting, or extracurricular activity. For example, soccer games, school plays, and school debates are events, but soccer practices, play rehearsals, and debate team meetings are not.
- The "school day" is the period from the midnight before to 30 minutes after the end of the official school day. For example, if school ends at 3:00 p.m., the school day is from midnight to 3:30 p.m. Summer school programs operated by the board of education or school governing authority on school premises are part of the regular school day.
- "Location" means where the event is being held and must be the same place as the beverage sales. For example, beverages can be sold on the side of the soccer field during a soccer game, but not in the school cafeteria while a game is played on the soccer field

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Present for BOE vote Tuesday, April 21, 2026

WINDSOR BOARD OF EDUCATION

AGENDA ITEM

For Consideration by the Board of Education at the Meeting of: April 21, 2026

PREPARED BY: Dr. Noha Abdel-Hady **PRESENTED BY:** Dr. Noha Abdel-Hady

ATTACHMENTS:

SUBJECT: Set Last Day of School for 2025-2026

BACKGROUND:

Per the Board approved calendar, June 16th would be 181st student day and 187th teacher day of Windsor's school year. The State of Connecticut requires each district to hold 180 student days.

It is proposed that the last day of school for Pre-K through grade 11 be scheduled for Monday, June 15, 2026 (180th student day) with an early release for students. On the afternoon of June 15th, teachers would have a staff meeting with their principal to conclude the year (on the normal last day of the year, teachers would be released after checking out their classroom).

Tuesday, June 16, 2026 would be a professional development day for staff.

Basically the proposed schedule above eliminates 1 student day and converts it to PD/staff meeting/teacher work time. Both the administrators and teachers' union are in agreement with the proposal.

RECOMMENDATION:

The Board shares the above information with the public.

Move the Board of Education approve a change to their approved 2025-2026 calendar setting Monday, June 15, 2026 as the last day of school for students in grades Pre-K to grade 11 and the last day for teachers would be Tuesday, June 16, 2026.

Recommended by the Superintendent: Nhahak

Agenda Item # 8.a.

WINDSOR BOARD OF EDUCATION

AGENDA ITEM

For Consideration by the Board of Education at the Meeting of: April 21, 2026

Prepared By: Dr. Noha Abdel-Hady **Presented By:** Dr. Noha Abdel-Hady

Attachment: Confirmation Letter

Subject: 2025-2026 Leader and Educators' Evaluation and Support Plan

---

Background:

On February 14th, 2024, the State of CT approved a new evaluation and support plan for teachers and leaders that began at the start of the 2024-2025 school year. The WPS PDEC committee has adopted the state model plan and made minor revisions to fit the district needs.

Status: The attachment is confirmation of the submission to the State of Connecticut Board of Education, the checklist indicates the continued use of the most recently approved ESP for the 2025-2026 school year.

PDEC Members:

Bonnie Fineman (Co-Chair)
Michelle Williams (Co-Chair)
Paul Pierce (Co-Chair)
Dana Gagne
Danielle Batchelder
Danielle Franklin
Ericka Fangiullo
Jay Mihalko
Jennifer Delskey
Jennifer Wilson
Jessica Gonzalez-Perez
Karen Lawson
Katrina Wicks
Keva Griggs
Lauren Canoni
Lindsey Jardine
Mary Cristofaro
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Noha Abdel-Hady
Lacresha Barnes
Stacey Paley
Taran Gruber
Tricia Lee
Yasmin Rincon
Carey Klingel
Christopher Bailey
Kristin Blume

Recommendation: Informational Only

Recommended by the Superintendent: N. Abdel-Hady

Agenda Item # 8.b.

STATE OF CONNECTICUT
STATE BOARD OF EDUCATION

TO: Dr. Noha Abdel-Hady, Acting Superintendent
Windsor Public Schools

FROM: Dr. Shuana K. Tucker
Chief Talent Officer

DATE: March 27, 2026

SUBJECT: Confirmation of 2025-26 Evaluation and Support Plan (ESP) Checklist Submission

This serves to confirm submission of Windsor Public Schools' 2025-26 Leader and Educator Evaluation and Support Plan (ESP) Checklist indicating the continued use of the most recent CT State Department of Education (CSDE) approved ESP for the 2025-26 school year. Please confirm with your local Board of Education that the CSDE has approved your submission.

Thank you for your diligent efforts in working toward the shared goal of continuous support and development of school and district leaders and educators to improve outcomes for all students.

You may submit any questions via email to the CSDE consultant for your region listed below.

RESC Region	Consultant	E-mail	Phone
CES, EdAdvance, LEARN and APSEPs	Sharon Fuller	Sharon.Fuller@ct.gov	860-713-6814
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cc: Sharon M. S. Fuller, Talent Office Consultant
Dr. Jessica G. Ocasio, Talent Office Consultant

Windsor's Leader and Educator Evaluation and Support Plans

Model by the Connecticut State Department of Education adapted for use by Windsor Public Schools, May 2024 / Revised September 2024



Windsor's Leader and Educator Evaluation and Support Plans

State of Connecticut

Ned Lamont, Governor

Connecticut State Department of Education

Charlene Russell-Tucker, Commissioner
Charles Hewes, Deputy Commissioner
Sinthia Sone-Moyano, Deputy Commissioner

State Board of Education

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Malia K. Sieve
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Kelli-Marie Vallieres, Ex Officio
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Acknowledgments

Educator Evaluation and Support Council:

American Association of Colleges for Teacher Education of Connecticut (AACTE-CT)

American Federation of Teachers of Connecticut (AFT-CT)

Connecticut Association of Boards of Education (CABE)

Connecticut Association of Public School Superintendents (CAPSS)

Connecticut Association of Schools (CAS)

Connecticut Education Association (CEA)

Connecticut Association of School Administrators (CASA)

Connecticut Federation of School Administrators (CFSA)

Increasing Educator Diversity (IED) Policy Oversight Council

Regional Educational Service Center (RESC) Alliance

Special recognition to the Connecticut State Department of Education Talent Office staff for their work with the Educator Evaluation and Support Council in the development of these plans.

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Contents

Leader Evaluation and Support Plan ***6***

Vision 9

The Purpose of this Model Guide 9

Guiding Principles 9

Connecticut Guidelines for Educator and Leader Evaluation and Support 2023 Components: Reimagining Educator and Leader Evaluation and Support 10

Standards and Criteria for Leaders 10

Leader Standards 11

Professional Learning Standards and Structures 11

The Continuous Learning Process: Goal Setting, Professional Practice, and Evaluator/Observer/ Stakeholder Feedback and Engagement 11

Leader Continuous Learning Process **13**

Growth Criteria 16

Tiered Support and Corrective Support Planning 16

Dispute Resolution 17

The Role of the Professional Development and Evaluation Committee (PDEC) 18

Local and State Reporting 19

Technical Assistance and Professional Learning 19

Appendices — Leader: 20

Information and Resources to Support Effective Implementation 20

Appendix A: Sample Reflection Questions – Leader 21

Self-Reflection Sample Questions 21

Professional Learning and Action Questions 21

Appendix B: Definition of Cohorts – Leader 23

Appendix C: Growth Criteria and Sources of Evidence – Leader 24

Appendix D: General Glossary – Leader 25

Appendix E: Glossary of Professional Learning Opportunities – Leader 28

Appendix F: Continuous Learning Process – Leader 30

1. TASK: Leader Goal Setting Form **31**

2. TASK: Leader Observation/Site Visit #1 ..... **32**

3. TASK: Leader MidYear Form **33**

4. TASK: Leader Observation/Site Visit #2 ..... **34**

5. TASK: Leader End of Year Form **35**

Appendix G: Observation/Site Visit Form – Leader 36

Appendix H Part 1: Corrective Support Plan Template – Leader 37

Appendix H Part 2: Corrective Support Plan Sample – Leader 38

Educator Evaluation and Support Plan ***40***

Vision 42

The Purpose of this Model Guide 42

Guiding Principles 40 42

Connecticut Guidelines for Educator and Leader Evaluation and Support 2023 Components: Reimagining Educator and

Leader Evaluation and Support.... 43
Standards and Criteria for Educators.... 43
Educator Standards.... 44
Professional Learning Standards and Structures.... 44
The Continuous Learning Process: Goal Setting, Professional Practice and Evaluator/Observer/ Stakeholder Feedback and Engagement.... 44
Educator Continuous Learning Process.... 46
Growth Criteria.... 49
Tiered Support and Corrective Support Planning.... 49
Dispute Resolution.... 50
The Role of the Professional Development and Evaluation Committee (PDEC).... 51
Local and State Reporting.... 52
Technical Assistance and Professional Learning.... 52
Appendices — Educator:.... 53
Information and Resources to Support Effective Implementation.... 53
Appendix I: Sample Reflection Questions – Educator.... 54
Self-Reflection Sample Questions.... 54
Professional Learning and Action Questions.... 54
Appendix J: Definition of Cohorts – Educator.... 56
Appendix K: Growth Criteria and Sources of Evidence – Educator.... 57
Appendix L: General Glossary – Educator.... 58
Appendix M: Glossary of Professional Learning Opportunities – Educator.... 62
Appendix N: Continuous Learning Process – Educator.... 64
1. TASK: Educator Goal Setting Form.... 65
2. TASK: Educator Observation Form#1.... 66
3. TASK: Educator MidYear Form.... 67
4. TASK: Educator Observation Form#2.... 68
5. TASK: Educator End of Year Form.... 69
Appendix O: Observation Forms – Educator.... 70
Appendix P: Tier 3 Support Plan – Educator.... 71
Appendix Q Part 1: Corrective Support Plan Template – Educator.... 72
Appendix Q Part 2: Corrective Support Plan Sample – Educator.... 74
Appendix R: Dispute Meeting Agenda Template – Educator.... 77
Appendix S: WPS Single Point Competency Feedback.... 78
Appendix T: Quick Reference Leader/Educator Continuous Learning Timeline.... 79
Quick Reference Leader/Educator Continuous Learning Timeline Summary.... 79
Bibliography.... 80

Leader Evaluation and Support Plan



Windsor Public Schools
Leader and Educator Evaluation and Support Plans

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Christopher Bailey, *Intermed Special Ed Supervisor*
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Lacresha Barnes, *CLO, Paraeducator*
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Vision

All Connecticut educators and leaders have the opportunity for continuous learning and feedback, to develop and grow, both individually and collectively, through the educator and leader evaluation and support system so that all Connecticut students experience growth and success.

The Purpose of this Model Guide

The Connecticut (CT) Model Evaluation and Support Plan is designed to support a comprehensive educator and leader evaluation system adopted by the Connecticut State Board of Education in concert with a wide range of stakeholders and pursuant to educator evaluation regulations. Connecticut General Statutes 10-151b requires that "the superintendent of each local or regional board of education shall annually evaluate or cause to be evaluated each teacher."

The CT Model Evaluation and Support Plan includes tools, guidance, and rubrics to support the evaluation of all educators and leaders. Professional Development and Evaluation Committees (PDECs) can adopt the model plan, adapt the model plan, or revise their own evaluation system to align with the CT Guidelines for Educator and Leader Evaluation and Support 2023. It is the intent that this model can serve as a foundation of evaluation and support practice aligned to the 2023 guidelines beginning in the initial year of implementation (2024-25) allowing for PDECs to develop an action plan from self-assess- ment toward best practices and innovation that will evolve over time. This plan will:

- introduce key components of the leader evaluation framework and the requirements set forth in the regulations;
- outline specific action steps, forms, and tools from the Model Evaluation and Support Plan specific to the evaluation of leaders; and
- highlight considerations, conditions, and systems necessary for effective implementation at the school/district level.

Guiding Principles

The transformational design of the leader evaluation and support model is grounded in six guiding principles that use high quality professional learning to advance leader practice, educator practice, and stu- dent learning, growth, and achievement.

- **Allow for differentiation of roles** *(for example for leaders: assistant superintendents, director of pupil services, various leaders in central office, principal, assistant principal; or for educators: teachers, counselors, instructional coaches, student support staff).*
- **Simplify and reduce the burden** *(eliminate technical challenges, paperwork, steps).*
- **Focus on things that matter** *(identify high leverage goal focus areas).*
- **Connect to best practices aimed at the development of the whole child** *(including, but not limited to, academic, social, emotional, and physical development).*
- **Focus on leader growth and agency** *(meaningfully engage professionals by focusing on growth and practice in partnership with others aligned to a strategic focus).*
- **Meaningful connections to professional learning** *(provide multiple pathways for participants to improve their own practice in a way that is meaningful and impactful).*
- **Specific, timely, accurate, actionable, and reciprocal feedback.**

Connecticut Guidelines for Educator and Leader Evaluation and Support 2023 Components: Reimagining Educator and Leader Evaluation and Support

The design of the Connecticut Guidelines for Educator Evaluation and Support 2023 (CT Guidelines 2023) are representative of research-based effective practice and include six elements.

- Standards and criteria
- Goal setting process
- Professional practice and educator growth
- Evaluator/observer/stakeholder feedback and engagement
- Process elements
- Dispute resolution

The combined vision, guiding principles, and overall framework for educators and leaders' evaluation and support describe a systematic process of continuous improvement and professional learning leading to high quality professional practice and improved outcomes for students. While components are similar for educators and leaders, there are components specific to educators and to leaders, resulting in two sections with similar processes within a district's evaluation and support system.

Standards and Criteria for Leaders

One of the primary goals of the leader evaluation and support system is to ensure the growth and development of their staff so they in turn may develop and enhance personal and professional strengths to meet the needs of all the students they serve. Leader practice discussions are based on a set of national or state performance standards set by professional organizations and mutually agreed upon by the PDEC. The following professional practice standards ground this model's framework. It is recommended that each PDEC create a process to review the standards and ensure a rubric accompanies the standards.

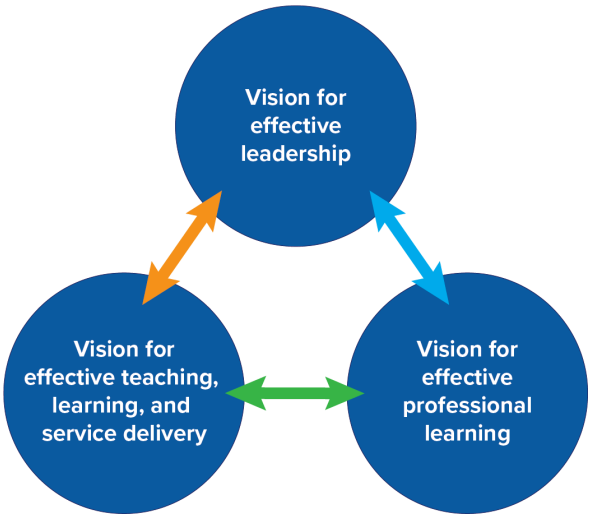
While a rubric serves as support for self-evaluation, dialogue, and feedback, it is recommended that a single point rubric is used to provide focus for high leverage goal(s) setting and professional learning.

Leader Standards

1. Professional Standards for School Leaders (PSEL)
2. Learning Forward's Professional Learning Standards (2022)
3. Common Core of Leading: CT School Leadership Standards 2012
4. CT Leader Evaluation and Support Rubric 2017

Professional Learning Standards and Structures

Professional learning is essential to the CT Guidelines 2023 model. Learning Forward Professional Learning Standards 2022, serve as a useful tool to illustrate how professional learning can deepen educator and leader knowledge, promote reflection, and maximize leader impact. As a tool, the professional learning standards help educators and leaders intentionally design learning, address content, and consider how to accomplish the expected learning transformation desired. Together the professional standards for leaders, educators and professional learning serve as the three visions that work together to lay the foundation for meaningful feedback and continuous learning.



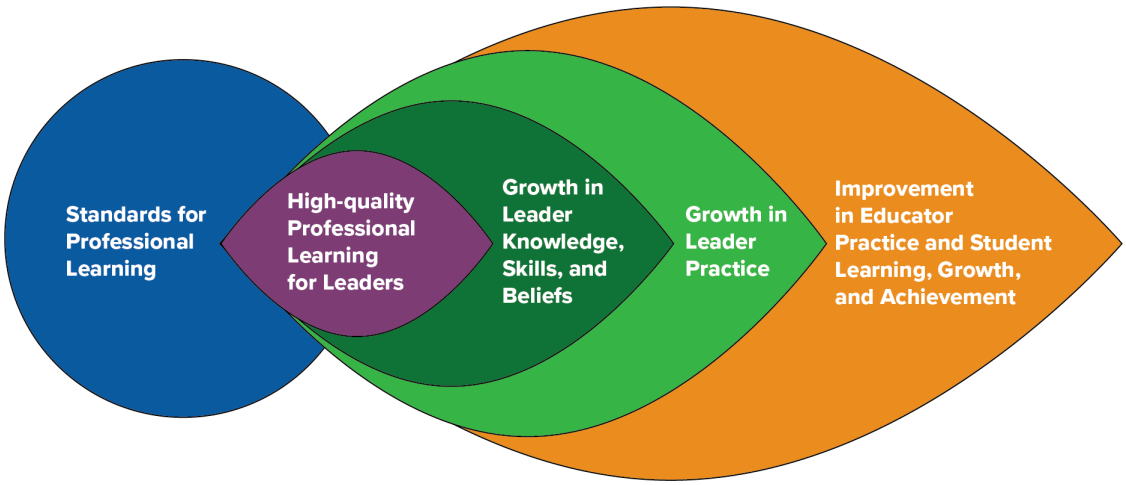
The Continuous Learning Process: Goal Setting, Professional Practice, and Evaluator/Observer/ Stakeholder Feedback and Engagement

The evaluation and support model is designed as a continuous learning process. The goal of the continuous learning process is to provide leaders with continuous learning opportunities for professional growth through self-directed analysis and reflection, planning, implementation, and collaboration. Regular dialogue and feedback, coupled with the opportunity to reflect on and advance practice, drive the continuous learning process. The process provides an opportunity for leaders to address organizational system and structure questions. In this process, the leader serves as the learner who actively engages in and directs their learning and feedback. The evaluator serves as a learning partner who supports the leader through the learning and growth process. Within the process, the leader collaborates and serves as a reflective practitioner to determine mutually agreed upon leader goal(s), professional practice and leader growth, and observation/site visit and feedback focus.

Within the continuous learning process, leaders check in with their evaluator a minimum of three times a year (fall goal setting, midyear check-in, and end-of-year reflection) to provide an opportunity for a reciprocal discussion of what is happening in the school or district, a sharing of evidence of professional learning and impact on growth, and identification of needs and mutually agreed upon next steps. The meetings are approached in a spirit of continuous improvement, reflection, and collaboration. Dialogue is important, however, there must be a balance of written and verbal feedback provided between check-ins based on observations/site visits, reviews of practice, and artifacts as required by the district plan, which must be provided periodically. Effective feedback is tied to standards and identifies strengths and areas of focus for growth.

At the core, educators and students learn best when educational leaders foster safe, caring, supportive learning communities, and promote rigorous curricula and instructional and assessment systems. This work requires educational leaders to build and strengthen a network of organizational supports — the professional capacity of teachers and staff; the professional community in which they learn and work; family and community engagement; and effective, efficient management and operations of the school/ district. In all their work, educational leaders are driven by the district/school's mission, vision, and portrait of a graduate. They are called to act ethically and with professional integrity, and they promote equity and cultural responsiveness. Finally, educational leaders believe their district/schools, educators, and they themselves, can continuously grow. They are tenacious change agents who model transformational leadership (adapted from PSEL Standards).

The graphic below, adapted from Learning Forward's Standards for Professional Learning 2022, shows the relationship between professional learning for leaders, educators, and students.



Below is a graphic with the associated steps, reflections, and resources associated with each step of the process to assist leaders and evaluators through the process. All leaders are assigned a primary evaluator (092 or 093).

Leader Continuous Learning Process

Evaluation Orientation no later than October 15
Completed prior to the start of the Continuous Learning Process



Goal Setting
Completed by November 1

Beginning of the Year Goal(s) and Planning

- Self reflect
- Review evidence

Goal(s), Rationale, Alignment, and Professional Learning Plan

- Draft goal(s), rationale, alignment, professional learning plan

Goal Setting Conference

- Mutually agree on 1-, 2-, or 3-year goal(s)
- Determine individual or group goal(s)
- Mutually agree on professional learning needs and support

Mid-year Check-in
Completed by March 1

Mid-Year Check-in: Reflection, Adjustments, and Next Steps

- Review & discuss currently collected evidence towards goal(s) and of practice
- Review professional learning, evidence, and impact on organization health, educator and student learning, growth and achievement

Mid-Year Conference

- Discuss evidence, reflection, and feedback from evaluator
- Adjust and revise as needed

End-of-Year Reflection
Completed by June 30

End-of-Year Reflection and Feedback Process

- Self-reflection: Review & discuss professional learning, evidence of impact on organizational health, educator and student learning, growth and achievement

End-of-Year Conference/ Summative Feedback and Growth Criteria

- Evaluator provides written summative feedback and guides next steps
- Annual Summary sign-off

Orientation on the leader evaluation and support process shall take place prior to the start of the process, no later than **October 15.** The orientation shall include:

- High leverage goal setting and professional learning plans
- Use of rubrics and standards
- Observation of practice/site visits
- Tiered supports
- Dispute resolution

Annual training for evaluators as required by C.G.S. 10-151b will include engaging in and providing reciprocal feedback tied to standards and evidence of professional practice.

Goal(s) Setting (Completed by November 1)

Leaders and their evaluators mutually agree upon a high leverage professional practice one-, two-, or three-year goal(s) and develop a plan for professional learning and support that is consistent with their professional status and goals (See Appendix B). Goals should always be connected to standards recommended by the PDEC and approved by the local board of education.

This is a process of feedback, reflection, goal setting, opportunities for professional learning, observations by an evaluator, and collection of multiple measures of leader growth, educator growth, and impact on student learning, growth, and achievement. Within this process, the leader collaborates in a learning partnership with their evaluator. The continuous learning process begins with dialogue around leaders' self-reflection (based on review of evidence and practice) to the identified rubric while collecting and analyzing evidence to identify and support an area for leader practice, educator and student outcomes, and organizational growth.

The leader will:

- Self-assess using the identified rubric.
- Identify a high leverage goal that impacts leadership practice and educator and organizational growth.
- Identify an individual or a collaborative goal.
- Develop a proposed professional learning plan to build knowledge and skill.

The leader shares the above with their evaluator during an initial goal setting conference that consists of dialogue around the proposed goal(s) and professional learning plan. During this conference, reciprocal dialogue between the evaluator and leader takes place to refine the proposed goal and professional learning plan as needed. In partnership, the leader and evaluator come to mutual agreement on the goal(s), multiple measures of evidence, professional learning plan, and support to drive progress toward goal attainment.

Midyear Check-in (Completed by March 1):

The midyear check-in provides an opportunity for the leader to self-reflect and review multiple and varied qualitative and quantitative indicators of evidence of impact on professional leadership practice; organizational growth; educator growth; and impact on student learning, growth, and achievement. Through reciprocal dialogue, the evaluator provides specific feedback based on evidence, standards, and the leader's goal(s). This is an overview of where the leader is in the process and what steps need to be taken to assist in continuous learning. During this check-in, revisions to the goal or learning plan, direction to tiered support, and next steps are documented.

End-of-Year Reflection/Summative Review (Completed by June 30)

End-of-year reflection provides an opportunity for the leader and evaluator to engage in reciprocal dialogue, similar to the midyear check-in, to discuss progress toward the leader's goal(s); professional learning as it relates to the leader's professional growth and professional practice; and impact on student learning, growth, and achievement as evidenced by multiple and varied qualitative and quantitative indicators of evidence. A written end-of-year summary includes the impact on leader practice and growth; possible next steps for the upcoming year; any concerns with the continuous learning process; new learning; and highlights of impact on educators, students, and school community; and completion of current goal or rationale for continuing the goal the following year. Analysis of evidence from the end-of-year summary is important for the leader's subsequent self-assessment and goal setting revisions or new goal(s).

This summary is based upon the mutually agreed upon goal(s) and identified standards and will make a distinction regarding the leader's successful completion of the professional learning process.

Professional Practice and Leader Growth

The implementation of the continuous learning process is shared between the leader and evaluator. For the duration of the learning process, leaders pursue learning and attainment of their goal(s), collecting evidence of practice related to their high leverage professional learning goal. Evaluators will provide leaders with feedback from observations of professional practice/site visits and dialogue, ensure timely access to support and collect evidence of leader performance and practice toward goal(s) through multiple sources, including site visits, student and staff feedback, or family engagement (see appendix B).

Observation of Professional Practice/Site Visits and Feedback

Observation of professional practice or site visits occur throughout the continuous learning process. The identified high leverage goal(s) provides a focus for strategic evidence collection and feedback. Evaluators provide leaders with feedback based on evidence, standards, and the educator's goal(s); ensure timely access to planned support(s); and collect evidence of leader practice and progress toward goal(s) through multiple sources of evidence including site visits, feedback, written or verbal, that is provided within five school days.

"Feedback is defined as a dynamic, dialogic process that uses evidence to engage a learner, internally or with a learning partner, in constructing knowledge about practice and self. Its primary purpose is learning that guides change" (Killion, 2019).

Quality feedback:

- Is based on multiple and varied quantitative and qualitative indicators of evidence, standards, and goal(s)
- Is personalized
- Is learning-focused or growth-oriented
- Provides questions for reflection to refine or revise strategies
- Expands understanding of one's experiences and their implications for future experiences
- Provides reflective opportunities to rework, refine, and reorder knowledge, attitudes, skills, and/or practices
- Is timely, frequent, and reciprocal

Definition of Cohorts	
Cohort 1 **Who:** ● New to leadership role (e.g. principal from assistant principal, etc.; first three years) ● New to LEA (first three years) **What:** ● Three observations of professional practice and/or site visits ● Verbal feedback within 5 school days and written feedback within 10 school days. ● Additional observations of professional practice and/or site visits as mutually agreed upon or deemed necessary	**Cohort 2** **Who:** ● Leaders who have successfully completed Cohort 1 in their current LEA **What:** ● Two observations of professional practice and/or site visits ● Verbal feedback within 5 school days and written feedback within 10 school days. ● Additional observations of professional practice and/or site visits as mutually agreed upon or deemed necessary.

Growth Criteria

Successful completion of the learning process is determined through multiple forms of evidence and reflection that is demonstrated by:

- Reflection supported with evidence of the impact of the leader's new learning on their practice/goal
- The impact the leader's new learning and practice had on the leader's practice, organizational growth, educator growth, and student outcomes
- Next steps

See Appendix C for further detail.

Tiered Support and Corrective Support Planning

All leaders require access to high-quality, targeted professional learning support to improve practice over time. Leaders and their evaluators thoughtfully consider and apply three tiers of support, as appropriate, with an evaluation process. All three tiers of support must be implemented prior to the development of a Corrective Support Plan.

A pattern of persistent lack of growth and reflection or resistance to growth-oriented feedback should lead to advancing levels of support with a defined process for placing a leader on a Corrective Support Plan with indicators of success for transitioning out of it. Evaluators must utilize and document all three tiers of support prior to the development of a Corrective Support Plan. The Corrective Support Plan shall be developed in consultation with the evaluator, leader and their exclusive bargaining representative if applicable.

Tier 1 (Includes All Leaders)

It is the expectation that all leaders consistently access opportunities for professional growth within their district. Tier 1 supports are broadly accessible professional learning opportunities for all, inclusive of, but not limited to, collegial conversations, school site visits, available district resources (e.g., books, articles, videos, etc.), formal professional learning opportunities developed and designed by your district PDEC and other leader supports (e.g., leadership coaching). These resources should be identified through a goal setting process by mutual agreement.

Tier 2 (Initial Support)

In addition to Tier 1, Tier 2 supports are more intensive in duration, frequency, and focus (e.g. observation of specific leadership practices, etc.) that can be either suggested by the leader and/or recommended by an evaluator. The leader will have up to 15 school days to demonstrate that they have taken steps to improve their practice. They will meet with their evaluator at the end of the 15 days to provide evidence of their improvement, receive feedback, and determine next steps. The leader has the option of including union representation in the Tier 2 support process.

Tier 3 (Intermediate Support)

In addition to Tier 1 and Tier 2, Tier 3 supports are put in place to respond to unresolved, previously discussed concerns that are collaboratively discussed and may be assigned by an evaluator. Tier 3 supports have clearly articulated areas of focus, duration of time, and criteria for success. All three tiers of supports must be documented and completed prior to movement to a Corrective Support Plan. Tier 3 supports shall be developed in consultation with the evaluator, leader and their exclusive bargaining representative for certified leaders chosen pursuant to C.G.S. §10- 153b. The leader has a maximum of 30 school days to complete their Tier 3 Support Plan. The start date and duration of time an educator is receiving this level of support should be clearly documented. See Appendix P for the required template for the Tier 3 Support Plan. The educator will meet with their evaluator at the end of the 30 days to provide evidence of their improvement, receive feedback, and determine next steps. During this Tier 3 progress review, a decision can be made to move to a Corrective Support Plan due to continued lack of growth/resistance to growth.

Corrective Support Plan

In addition to Tier 1, Tier 2, and Tier 3, a pattern of persistent lack of growth and reflection or resistance to

growth-oriented feedback should lead to advancing levels of support with a defined process for placing a leader on a Corrective Support Plan with indicators of success for transitioning out of it. Evaluators must utilize and document all three tiers of support prior to the development of a Corrective Support Plan. The Corrective Support Plan shall be developed in consultation with the evaluator, leader and their exclusive bargaining representative for certified leaders chosen pursuant to C.G.S. §10-153b.

The Corrective Support Plan must contain:

- clear objectives specific to the well documented area of concern;
- resources, support, and interventions to address the area of concern;
- timeframes for implementing the resources, support, and interventions; and
- supportive actions from the evaluator.

Corrective supports shall be developed in consultation with the evaluator, leader, and their exclusive bargaining representative for certified educators chosen pursuant to C.G.S. §10-153b. The start date and duration of time an educator is receiving this level of support should be clearly documented. See Appendix H for the required template for Corrective Support Plan. The leader has a maximum of 30 school days to complete their Corrective Support Plan. At the conclusion of the Corrective Support Plan period, a number of outcomes are possible as determined in consultation with the evaluator, educator, and bargaining unit representative.

Dispute Resolution

The purpose of the dispute resolution process is to secure at the lowest possible administrative level equitable solutions to disagreements, which from time to time may arise related to the evaluation process. The right of appeal is available to all in the evaluation and support system. As our evaluation and support system is designed to ensure continuous, constructive and cooperative processes among professional educators, educators/leaders and their evaluators are encouraged to resolve disagreements informally.

Ultimately, should a leader disagree with the evaluator's assessment and feedback, the parties are encouraged to discuss these differences and seek common understanding of the issues. As a result of these discussions, the evaluator may choose to adjust the report but is not obligated to do so. The leader being evaluated has the right to provide a statement identifying areas of concern with the goals/ objectives, evaluation period, feedback, and/or professional development plan, which may include the individual professional learning plan or a Corrective Support Plan.

Any such matters will be handled as expeditiously as possible, and in no instance will a decision exceed thirty (30) workdays from the date the leader initiated the dispute resolution process. Confidentiality throughout the resolution process shall be conducted in accordance with the law.

Process

The leader being evaluated shall be entitled to collective bargaining representation at all levels of the process and must inform their evaluator of a dispute within 10 school days of receiving feedback.

1. Within three school days of articulating the dispute in writing to his/her/their evaluator, the leader being evaluated and the evaluator will meet with the objective of resolving the matter informally.
2. If there has been no resolution, the individual may choose to continue the dispute resolution process in writing to the superintendent or designee within three workdays of the meeting with his/her/their evaluator (step 1). The leader being evaluated may choose between two options.

The required dispute meeting agenda template (See Appendix R) should be completed by the evaluator, PDEC committee, neutral party, or superintendent prior to the meeting.

Option 1:

The issue in dispute may be referred for resolution to a subcommittee of the Professional Development and Evaluation Committee (PDEC), which will serve as a neutral party.* The superintendent or designee and the respective collective bargaining unit for the district may each select one representative from the PDEC to constitute this subcommittee, as well as a neutral party as mutually agreed upon between the superintendent and the collective bargaining unit. It is the role of the subcommittee to determine the resolution of the dispute and to identify any actions to be taken moving forward and to notify the superintendent of the decision.

**In the instance that a district is too small to have a full PDEC from which to select three individuals, the superintendent and leader may select three mutually agreed upon persons to serve as the neutral party for resolving the dispute. Each individual must be a Connecticut certified leader and may or may not be from within the district.*

Option 2:

The leader being evaluated requests that the superintendent or designee solely arbitrate the issue in dispute. In this case, the superintendent will review all applicable documentation and meet with both parties (evaluator and leader being evaluated) as soon as possible, but no longer than five school days from the date of the written communication to the superintendent. The superintendent will act as arbitrator and make a final decision, which shall be binding.

Time Limits

1. Since it is important that appeals be processed as rapidly as possible, the number of days indicated within this plan shall be considered maximum. The time limits specified may be extended by written agreement of both parties.
2. Days shall mean workdays. Both parties may agree, however, to meet during breaks at mutually agreed upon times.

3. The leader being evaluated must initiate the appeals procedure within 10 workdays of the scheduled meeting in which the feedback was presented. If no written initiation of a dispute is received by the evaluator within 10 workdays, the leader shall be considered to have waived the right of appeal.
4. The leader being evaluated must initiate each level of the appeal process within the number of days indicated. The absence of a written appeal at any subsequent level shall be considered as waiving the right to appeal further.

The Role of the Professional Development and Evaluation Committee (PDEC)

The PDEC serves as the collaborative decision maker using the consensus protocol to create, revise, and monitor the evaluation and support model, as well as the professional learning plan to propose to the local board of education for mutual agreement.

Pursuant to Connecticut General Statute 10-220a and Public Act 23-159 Section 11(b)(3), each local and regional board of education must establish a professional development and evaluation committee to include at least one teacher and one administrator, selected by the exclusive bargaining representative for certified employees, at least one paraeducator selected by their exclusive bargaining representative, and other personnel as the local board deems appropriate. It is vital that individuals selected as delegates for administrators, teachers, paraeducators, and other school personnel are representative of the various classifications within the groups (see examples below).

Other School Personnel	Educator	Leader
• Attendance counselor • Paraeducator (required) • Behavior technician • Parent and family liaison • Social emotional support staff	• Classroom teacher • CTE teacher • Library media specialist • Reading interventionist • Instructional coach • Special education teacher • Social worker • School psychologist • Speech pathologist	• Principal • Assistant principal • TESOL supervisor • Special education supervisor • Assistant superintendent • Curriculum coordinator • Talent development supervisor

The duties of PDECs shall include, but are not limited to,

- participation in the development or adoption of a teacher evaluation and support program for the district, pursuant to section 10-151b;
- the development, evaluation, and annual updating of a comprehensive local professional development plan for certified employees of the district; and
- the development and annual updating of a comprehensive local professional development plan for paraeducators of the district.

The educator and leader evaluation and support program shall be developed through mutual agreement between the local or regional board of education and the PDEC. If the local or regional board of education and the PDEC are unable to come to mutual agreement, they shall consider the state model evaluation and support plan adopted by the State Board of Education and may, through mutual agreement, adopt such model educator and leader evaluation and support programs.

If the local or regional board of education and the PDEC are unable to mutually agree on the adoption of the State Board of Education's model program, then the local or regional board of education shall adopt and implement an educator and leader evaluation and support program developed by such board, pro- vided that the program is consistent with the guidelines adopted by the State Board of Education.

Local and State Reporting

The superintendent shall report:

1. the status of teacher evaluations to the local or regional board of education on or before the last Board of Education meeting of each school year; and
2. the status of the implementation of the teacher evaluation and support program, including the frequency of evaluations, the number of teachers who have not been evaluated, and other requirements as determined by the Department of Education, to the Commissioner of Education on or before September 15 of each year.

For purposes of this section, the term “teacher” shall include each professional employee of a board of education, below the rank of superintendent, who holds a certificate or permit issued by the State Board of Education.

Technical Assistance and Professional Learning

The CSDE works closely with schools and districts to learn what support is most needed for effective implementation of the CT Guidelines 2023 framework. To that end, the CSDE continues to develop resources in partnership with the six regional educational service centers, ACES, CES, CREC, EASTCONN, EdAdvance, and LEARN along with CAS and feedback from districts. You are encouraged to reach out for technical assistance and professional support during the transition to this new framework.

Appendices — Leader:

Information and Resources to Support Effective Implementation

Appendix A: Sample Reflection Questions – Leader

Self-Reflection Sample Questions

- Thinking about the success and challenges you may have encountered last year, or at the start of this year, what questions do you have about leadership and organizational well-being? What new learning might you want to explore to inform your understanding of these questions and professional leadership practice?
- In reviewing the rubric, what areas emerge as opportunities for your professional learning and practice?
- Based on your current organization's strengths and needs, and/or knowledge of district/school/ program goals, what new learning might you explore to address the needs?
- Based on knowledge of your students/adult learners, and/or knowledge of school/program goals, are there any new strategies or methods you'd like to explore and implement this year?
- How do you see yourself contributing to the school or district's mission, vision, and/or Portrait of a Graduate and what strategies can you learn more about to support that focus?
- What are you considering for your learning goal?
- What will it look like when you achieve your goal?

Professional Learning and Action Questions

Indicators of success

- What question will you focus on to address your goals?
- What are the criteria for an accomplished practice?
- How do you plan to collect and analyze evidence to assess progress toward your goals?
- What research/professional readings might you explore to support your professional learning and achieve your goal?
- What specific professional learning might you need to achieve your goal?
- What support might you need from your colleagues, supervisor, others? How frequently?
- How might you apply your learning to practice? How often?

Determine Evidence

- What evidence might you collect and analyze to understand progress toward your goal? Quantitative or qualitative or both?
- What ways would you like me as your evaluator to collect data/evidence for feedback?
- From how many different situations should we examine data/evidence?
- What are the advantages and disadvantages of the identified evidence?
- How will the data help us to analyze your practice?
- What is your timeline for collecting this evidence and measuring impact?
- What are the anticipated challenges or obstacles, and how do you plan to address them?
- How might you communicate/share your professional learning to your colleagues or families?
- What opportunities for professional learning do you believe would be beneficial for your growth as an educator?
- In what ways can we encourage collaboration and communication among colleagues to promote a culture of sharing best practices?

Analysis of Evidence

- What do you observe in your evidence?
- What patterns, themes, or outliers do you notice?
- What does the evidence say about how you are doing in relation to your goal and indicators of success?
- Based on the evidence and your practice overall, what are your strengths?
- In what aspect do you want to continue to grow or refine your knowledge, skill, practice?

Learning Reflection and Next Steps

- What is clear to you now?
- What are you learning?
- What do you understand now that you didn't understand as clearly before?
- How will this learning influence future actions?
- What is a single sentence conclusion that represents your learning?
- Under what circumstance might this conclusion not be true?
- What are ways you continue to refine your practice?
- What more do you want to learn and practice?
- How might you accomplish that? What is your next plan?
- What resources and support do you want or need?
- Once learning has been implemented: What effect did the learning have on practice, students?

Reflect on the Feedback Process

- In what ways did my engagement with you support your learning?
- What did I do as a learning partner that helped you as a learner and how did it help?

Appendix B: Definition of Cohorts – Leader

Definition of Cohorts	
Cohort 1 **Who:** ● New to leadership role (e.g. principal from assistant principal, etc.; first three years) ● New to LEA (first three years) **What:** ● Three (3) observations of professional practice and/or site visits ● Verbal feedback within 5 school days and written feedback within 10 school days. ● Additional observations of professional practice and/or site visits as mutually agreed upon or deemed necessary	**Cohort 2** **Who:** ● Leaders who have successfully completed Cohort 1 in their current LEA **What:** ● Two (2) observations of professional practice and/or site visits ● Verbal feedback within 5 school days and written feedback within 10 school days. ● Additional observations of professional practice and/or site visits as mutually agreed upon or deemed necessary.

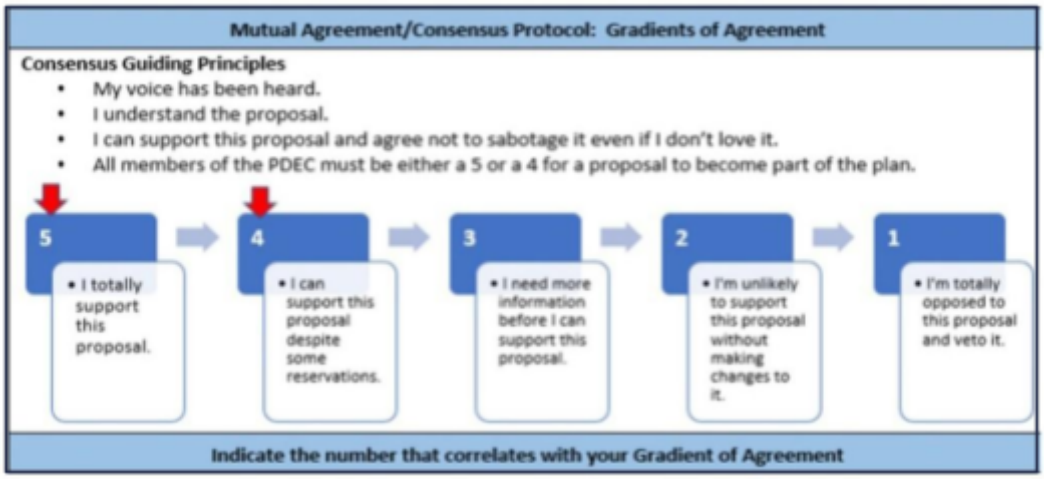
Appendix C: Growth Criteria and Sources of Evidence – Leader

Growth Criteria	Possible Sources of Evidence
Development of New Learning and Impact on Practice The leader can demonstrate how they developed new learning within the continuous learning process through multiple sources (e.g., observational feedback, data, walkthroughs, etc.) and how they used their new learning to improve practice. **Impact on the Organization** The leader can demonstrate how they positively impacted the organizational health and can articulate connections/rationale between the improved learning and their own changes in practice. **Impact on Community** The leader can demonstrate how they worked effectively with colleagues/families/community.	● Information from site visits ● Strategic plans ● Learning walk/instructional rounds ● Self-reflection (e.g., journals, learning logs) ● Leader created professional learning materials ● Operational artifacts (e.g., schedules, procedural revisions) ● Educator learning outcomes ● Policy updates ● Community communications ● Constituent feedback ● Program development and implementation ● Quantitative measure of whole child development (including, but not limited to, academic, social, emotional, and physical development) ● Systems and structures

Appendix D: General Glossary – Leader

consensus protocol: Consensus decision-making is a creative and dynamic way of reaching agreement in a group. Instead of simply voting for an item and having the majority getting their way, a consensus group is committed to finding solutions that everyone actively supports — or at least can live with.

By definition, in consensus no decision is made against the will of an individual or a minority. If significant concerns remain unresolved, a proposal can be blocked and prevented from going ahead. This means that the whole group has to work hard to find win-win solutions that address everyone's needs.



From *Consensus decision making*. Seeds for Change. (n.d.). https://www.seedsforchange.org.uk/consensus

Corrective Support Plan: A pattern of persistent lack of growth and reflection or resistance to growth-oriented feedback should lead to advancing levels of support with a defined process for placing an educator on a Corrective Support Plan with indicators of success for transitioning out of it. The Corrective Support Plan shall be developed in consultation with the educator and their exclusive bargaining representative for certified teachers chosen pursuant to C.G.S. §10-153b. Corrective Support Plans shall include clear objectives specific to the well documented area of concern; resources, support, and interventions to address the area of concern; timeframes for implementing the resources, support, and interventions; supportive actions from the evaluator; and outcomes or further action as determined in consultation with the evaluator, leader, and bargaining unit representative.

check-ins: Formal or informal meetings or conferences held in the spirit of collaboration between the leader and evaluator and to engage in reciprocal dialogue regarding what is happening in one's practice at that moment in time including goal(s), professional learning, multiple and varied forms of quantitative and qualitative evidence, adjustments, and next steps (i.e., classroom/school/building or district). During each school year, a minimum of three check-ins provide an opportunity for discussions to set and adjust goals, celebrate growth and positive impact, identify needs, assess and discuss evidence and learning, and next steps in one's learning.

community: A school community typically refers to the localized group of students, educators, parents, and staff within a specific school, fostering a sense of belonging and shared objectives within that school.

A district community encompasses a broader scope, involving multiple schools within a school district, and often includes administrators, teachers, students, and families collaborating across various educational schools and programs within that district. The district community addresses overarching educational policies, resource allocation, and coordination among multiple schools and programs to promote consistent and effective education across a larger administrative unit.

continuous learning process: The continuous learning process is a cycle of feedback, reflection, goal setting, opportunities for professional learning, feedback from observations (peers or evaluators), and a collection of multiple measures of evidence. There are multiple models of continuous learning including, but not limited to:

- The Supporting Teacher Effectiveness Project (STEP)
- Massachusetts Department of Elementary and Secondary Education 5-Step Cycle and Model System for Educator Evaluation
- Ohio Department of Education – Ohio Teacher Evaluation System (OTES 2.0) Framework
- Tennessee Educator Acceleration Model
- Connecticut TEAM Process (CAPA)

dispute resolution: A process for resolving disputes in cases where the evaluator and leader being evaluated cannot agree on goals/objectives, the evaluation period, feedback, or the professional learning plan or other outcomes of the evaluation process.

evidence: Evidence collected and presented as a part of the evaluation system may include (but is not limited to) artifacts, observations of practice, site visit feedback, and reflections of the leader impact on organizational health, educator growth, and student learning, growth, and achievement as part of the leader feedback process.

feedback: "Feedback is defined as a dynamic, dialogic process that uses evidence to engage a learner, internally or with a learning partner, in constructing knowledge about practice and self. Its primary purpose is learning that guides change" (Killion, 2019).

Quality feedback:

- Is based on multiple and varied quantitative and qualitative indicators of evidence, standards, and goal(s)
- Is personalized
- Is learning-focused or growth-oriented
- Provides questions for reflection to refine or revise strategies
- Expands understanding of one's experiences and their implications for future experiences
- Provides reflective opportunities to rework, refine, and reorder knowledge, attitudes, skills, and/ or practices
- Is timely, frequent, and reciprocal

From Killion, J. (2019). *The feedback process: Transforming Feedback for Professional Learning. Learning Forward.*

formal observations: A formal observation is a structured and planned process of watching, assessing, and evaluating a leader's performance. This typically includes a pre-conference and post-conference and results in a written evaluation within 10 school days.

goals and standards: Should be a high leverage goal based on professional practice standards and consistent with the goals of the district. Clear alignment between district, school, and certified staff goals (departments, grade-level teams, or collaborations) improves the collective effectiveness of practice.

growth criteria: Successful completion of the Continuous Improvement Process, supported with evidence that includes the impact the leader's new learning had on their practice/goal, along with a reflection on challenges and next steps; and the impact the leader's new learning and practice had on organizational health, educator growth, student learning, growth, and/or achievement, supported by evidence.

high leverage goals: High leverage goals are based on professional practice standards and are transferable across roles, disciplines, and positions and aligned to a strategic focus. They address strategies for development of human capital (people), instruction (knowledge and skills), and organizational management that transcends schools (Grissom, et al., 2021).

informal observations: An informal observation is an unplanned visit intended to evaluate educator performance. This typically includes either verbal or written feedback provided to the educator within five school days.

leader: A leader is defined as someone in a leadership position who has attained the 092 certification. This may include assistant superintendent, principal, dean of students, assistant/vice principal, pupil services director, department chair. This is not an exhaustive list, rather to illustrate the definition.

Superintendents will confirm district leaders with evaluation roles.

multiple measures: Can include, but is not limited to, structures and systems to support educator learning and growth, culture and climate changes, student learning, growth, and achievement as mutually agreed upon during the goal-setting process. Additional evidence relative to one or more competencies.

mutual agreement: An agreement or condition that is reciprocal or agreed upon by all parties.

organizational health: Organizational health in schools and districts means how well the whole school system is functioning. It encompasses various interconnected elements that contribute to a positive and thriving learning environment, including leadership, culture and climate, communication, professional learning, resource management, collaboration and teamwork, student-centered focus, continuous improvement, community engagement, and innovation.

PDEC (Professional Development and Evaluation Committee): The Professional Development and Evaluation Committee serves as the collaborative decision maker to create, revise, and monitor the evaluation and support program for the district, as well as the professional learning plan for certified employees of the district.

professional learning: Professional learning and growth are centered on accelerating personal and collective learning and closing the knowing-doing gap for leaders and teachers. This includes co-designing interactive, sustained, and customized learning growth opportunities that are grounded in the evidence that is most needed and most effective. See also Appendix E, Glossary of Professional Learning Opportunities.

review of practice: Reviews of practice are non-classroom observations and may include, but are not limited to, observation of delivery of professional learning, facilitation of meetings, coaching/mentoring other leaders or teachers, review of leader or educator work, or review of other leader artifacts.

rubric: A rubric is a systematic and standardized tool, designed as a continuum, and is used to communicate the performance of educators based on specific criteria. It can be used to evaluate a single criterion to emphasize specific expectations and provide targeted feedback for improvement. It can encourage a growth mindset.

single point competency: A description of a standard of behavior or performance that is framed only as a single set of desired outcomes rather than laid out across a rating or scale of performance like a more traditional rubric.

site visits: A site visit provides an opportunity for observation and dialogue with the leader that may include but is not limited to leader engagement with educators, families or other partners in the work with a focus on the leader's goal.

student outcomes: Student outcomes include multiple measures of student learning, growth, and achievement as mutually agreed upon during the goal setting process.

tiered supports:

- Tier 1 It is the expectation that all leaders consistently access opportunities for professional growth within their district. Tier 1 supports are broadly accessible professional learning opportunities for all, inclusive of, but not limited to, collegial conversations, school site visits, available district resources (e.g., books, articles, videos, etc.), formal professional learning opportunities developed and designed by your district PDEC and other leader supports (e.g., leadership coaching). These resources should be identified through a goal setting process by mutual agreement.
- Tier 2 In addition to Tier 1, Tier 2 supports are more intensive in duration, frequency, and focus (e.g., observation of specific leadership practices, etc.) that can be either suggested by the leader and/or recommended by an evaluator.
- Tier 3 Tier 3 supports are responsive to previously discussed concerns and are assigned by an evaluator. Tier 3 supports have a clearly articulated area of focus, duration of time, and criteria for success, and may include a decision to move to a Corrective Support Plan.

Appendix E: Glossary of Professional Learning Opportunities – Leader

High quality professional learning enhances both leader practice and outcomes for each and every educator and student. High quality professional learning integrates research on effective adult learning and uses interactive, flexible designs to achieve intended outcomes.

advanced coursework: Courses offered at a college, university, or other institution, in person or online, which further educator skills and/or provide professional training.

case study: A team that engages in a case study using information in a student's cumulative folder or other documented information with the intention of determining next steps, i.e., IEP review or attendance records.

coaching: A process based on trust in which professional colleagues work together to reflect on current practices; expand, refine, and build new skills; share ideas; teach one another; conduct classroom research; or solve problems.

examination of student work: Individuals or groups of educators review samples of work from various students. They identify strengths, areas for improvement, and design instructional plans as a result of the examination.

job-embedded: Any activity that is tied in with authentic classroom practice. May include, but is not limited to:

- Examining student data
- Mentoring
- Book study (see below)
- Co-planning
- Investigating print and online resources
- Self-reflection
- Visitations/observations within a school

lesson study: Groups of teachers planning a lesson, observing one present the lesson, and then reflecting on it afterwards.

mentoring: A relationship between a less experienced educator and a more experienced mentor, in which the mentor provides guidance and feedback regarding practice.

peer observation: An opportunity for teachers to observe each other during classroom instruction. Teachers may want to observe peers to see a new teaching strategy in action, learn a new model of instruction, or analyze classroom processes and procedures.

personal professional reading: Individual, self-driven reading and processing of texts in order to improve one's own teaching practice.

professional literature study: Structures and collaborative processes in which individuals or groups of professionals engage in the examination and discussion of a relevant and informative text. The purpose of this study is to promote continuous learning, professional development, and the exchange of ideas and best practices within a specific field or industry. By engaging in a professional book study, individuals can deepen their understanding of key concepts, stay current in their field, and enhance their ability to apply new knowledge to their professional practice. This collaborative and structured approach to learning helps foster a culture of continuous improvement and professional growth within a community of practitioners.

protocols: A learning tool that is rule-based. Often implemented to aid in new learning for groups or individuals. May include article discussions, case studies, book reviews, and other procedures used in its workshops and other learning designs.

school visits: Observation of practice or teaching at a different school or institution to gain new knowledge, ideas, or activities.

student shadow: Follow a particular student during the academic day for a designated time, for a particular identified purpose, i.e., engagement.

walkthroughs: A team of leaders who visit classrooms to find evidence for a particular problem of practice. This evidence is reviewed, and next steps are determined as a result of this practice.

web-based learning: Use of online resources or learning activities to develop new learning or techniques for the classroom.

workshops: Meetings where participants are involved in group discussions or learning experiences and are normally organized around one or more theme areas. Workshops allow participants with differing values and priorities to build a common understanding of the problems and opportunities confronting them. May take place at school or outside.

Appendix F: Continuous Learning Process – Leader

Evaluation Orientation

Orientation to Leader Evaluation was Completed on:

Date No later than October 15th

Non-negotiable Process Element of the CT Guidelines (2023)

All forms below are available to be completed in the Vector Evaluation platform.

- Leader Evaluation Orientation and Goal-Setting Form
- Leader Observation/Site Visit Form
- Leader Mid-Year Check-In Form
- Leader End-of-Year Self-Reflection Form
- Leader End-of-Year Conference Form

1. TASK: Leader Goal Setting Form

Leader Name:	Leader School:		
Leader Role:			
1. Select One: • Cohort 1 *New to leader role or first three years in LEA • Cohort 2 *Years 4 (in LEA)	**2. Select One:** • Individual goal • Collaborative goal **Was this decided upon mutual agreement?**	**3. Select One:** • 1-year goal • 2-year goal • 3-year goal **Was this decided upon mutual agreement?**	**Select One**: • PSEL Rubric (Professional Standards for Educational Leaders 2015) • Common Core of Leading: CT School Leadership Standards 2012 • CT Leader Evaluation and Support Rubric 2017

Beginning of the Year Goals & Planning

Self-Reflection

Completed by Leader: *See Self-Reflection sample reflection questions (Appendix A: Sample Reflection Questions-Leader)*

4. Capture your self-reflection here; consider using the Sample Questions found within the model to guide your thinking. *See Examples of Evidence Types (Appendix C: Growth Criteria and Sources of Evidence)*	

Goal, Rationale, Alignment and Professional Learning Plan

Completed by Leader

5. Based on your analysis above, what is/are your goal(s)? Include a rationale for the length of your goal (1, 2, 3 year).	
6. What evidence of leader learning, educator learning, and/or student growth and achievement, and/or organizational measures will you use to reflect, monitor, and adjust your goal? What is your learning plan to support achieving your goal? See Professional Learning & Action Questions to guide your plan. *(Appendix A: Sample Reflection Questions - Leader)*	
7. What evidence will you use to reflect, monitor, and adjust your goal(s)?	
8. For multi-year goal(s), what might be the potential focus of years 2 and 3 (to be revisited and revised annually and as needed throughout the learning process)?	
9. In what ways might this goal(s) contribute to the school and/or district's vision, mission, and strategic goals?	

Goal Setting Conference Date _____

Completed by Evaluator by November 1.

10. What is the rubric and standard you chose on which your observations will focus? In addition, please copy and paste below the text from the Profiicent/Effective column for your selected standard. This is the single point competency on which your observations will focus.	11. Evaluator Notes Evaluator Supports Required/Suggested ☐ Tier 1 ☐ Tier 2 ☐ Tier 3

Workflow:

1. Direct Report completes steps 1-9;
2. Evaluator schedules goal setting conference and completes 10 and signature (Eval Approve w/ Date)
3. Direct Report Sign w/Date

2. TASK: Leader Observation/Site Visit #1

Leader Evaluation Observation/Site Visit #1 – Required		
Leader Name: Populate from Goal setting form	**Leader Location:** Populate from Goal setting form	
Leader Role: Populate from Goal setting form	**Leader Goal/Observation Focus:** Populate from Goal setting form	
1. Choose one (Drop down). • Cohort 1 (Pre-/Post-Conference Required) • Cohort 2 (Post-Conference Required) • Additional Site Visit (Pre-/Post-Conference Optional)	2. Leader Goal/Observation Focus:	
Pre-Observation/Visit (if necessary) Date _____ *Items below completed by Leader (as needed/required)*		
3. Meeting Plan and/or Context	*Upload and provide hyperlink here, as appropriate*	
4. Pre-Conference Notes, including identified competency focus for the observation.		
Observation/Site Visit Evidence Date _____ *Completed by the Evaluator*		
5. Observation Notes and Evidence		
Post-Observation/Visit Reflection *Completed by the Leader*		
6. What does today's evidence tell you?		
7. Are there patterns, trends, or outliers?		
8. How will our collaborative reflection help you move forward and apply your learning in your next steps?		
Post-Observation/Visit Conference Feedback Date _____ *Completed by the Evaluator*		
9. Feedback on Evidence, Standards, and Educator's Goal		
10. Evidence of Strengths	**11. Areas for Growth and/or Next Steps**	**12. Feedback on Single-Point Competency from Goal Setting Form (if observed)**
		Insert competencies indicated on #4. Of Goal Setting form.

Workflow:

1. Evaluator completes step 1. Direct Report completes steps 2-3.
2. Evaluator schedules site visit pre-conf (if necessary) and site visit, and completes #4.
3. Direct Report completes Post Observation/Site Visit #5-7
4. Evaluator schedules and holds Post Conf and completes #8-11 and signature (Eval Approve w/ Date)
5. Direct Report Sign w/Date

3. TASK: Leader MidYear Form

Leader Name: Populate from Goal setting form	**Leader Location:** Populate from Goal setting form
Leader Role: Populate from Goal setting form	**Leader Goal/Observation Focus:** Populate from Goal setting form

Midyear Check-in: Reflection, Adjustment(s), and Next Steps

Completed by Leader

Non-negotiable Process Element of the CT Guidelines (2023)

See Self-Reflection sample reflection questions (Appendix A: Sample Reflection Questions - Leader)

What has been your progress to date on your professional learning plan and your goal(s), and how do you know? What are your next steps (including any adjustments) and why?	**1. Self-Reflection:**

2. Links to Evidence:

Midyear Conference Date _____

Completed by Evaluator (by March 1)

3. **Feedback to Leader** (Feedback regarding progress on professional learning and progress toward goal(s) as well as any adjustments to focus areas result from the discussion. Include change in tiered supports, if recommended.):

Workflow:

1. Direct Report completes steps 1-2;
2. Evaluator schedules Midyear Conf and completes 3 and signature (Eval Approve w/ Date)
3. Direct Report Sign w/Date

4. TASK: Leader Observation/Site Visit #2

Leader Evaluation Observation/Site Visit #2 – Required		
Leader Name: Populate from Goal setting form	**Leader Location:** Populate from Goal setting form	
Leader Role: Populate from Goal setting form	**Leader Goal/Observation Focus:** Populate from Goal setting form	
1. Choose one (Drop down). •Cohort 1 (Pre-/Post-Conference Required) •Cohort 2 (Post-Conference Required) •Additional Site Visit (Pre-/Post-Conference Optional)	2. Leader Goal/Observation Focus:	
Pre-Observation/Visit (if necessary) Date _____ *Items below completed by Leader (as needed/required)*		
3. Meeting Plan and/or Context	*Upload and provide hyperlink here, as appropriate*	
4. Pre-Conference Notes, including identified competency focus for the observation.		
Observation/Site Visit Evidence Date _____ *Completed by the Evaluator*		
5. Observation Notes and Evidence		
Post-Observation/Visit Reflection *Completed by the Leader*		
6. What does today's evidence tell you?		
7. Are there patterns, trends, or outliers?		
8. How will our collaborative reflection help you move forward and apply your learning in your next steps?		
Post-Observation/Visit Conference Feedback Date _____ *Completed by the Evaluator*		
9. Feedback on Evidence, Standards, and Educator's Goal		
10. Evidence of Strengths	**11. Areas for Growth and/or Next Steps**	**12. Feedback on Single-Point Competency from Goal Setting Form (if observed)**
		Insert competencies indicated on #4. Of Goal Setting form.

Workflow:

1. Evaluator completes step 1. Direct Report completes steps 2-3.
2. Evaluator schedules site visit pre-conf (if necessary) and site visit, and completes #4.
3. Direct Report completes Post Observation/Site Visit #5-7
4. Evaluator schedules and holds Post Conf and completes #8-11 and signature (Eval Approve w/ Date)
5. Direct Report Sign w/Date

5. TASK: Leader End of Year Form

Leader Name: Populate from Goal setting form	**Leader Location:** Populate from Goal setting form
Leader Role: Populate from Goal setting form	**Leader Goal/Observation Focus:** Populate from Goal setting form

End-of-Year Reflection and Feedback Process

Non-negotiable Process Element of the CT Guidelines (2023)

Self-Reflection

Completed by Leader: See Self-Reflection sample reflection questions (Appendix A: Sample Reflection Questions - Leader)

• What impact did your new learning have on your practice/goal(s), and how do you know? • What impact did your new learning have on your leadership practice, on educator and/or student learning, growth, and/ or achievement, and/or on organizational health, and how do you know? • What challenges did you encounter and what are your next steps with your professional learning?	**1. Self-Reflection:**
2. Links to Evidence:	

End-of-Year Conference Date _____

Completed by Evaluator (by June 30)

Summative Feedback and Growth Criteria

Completed by Evaluator (Appendix C: Growth Criteria and Sources of Evidence)

3. Summative Feedback	
4. Development of new learning and impact on leadership practice related to goal(s).	
5. Impact of new learning and leadership practice on key partners and or organizational outcomes.	
6. Impact of new learning on greater community.	
7. Successful Completion of the Evaluative Cycle	• Yes • No
8. Supports Required/Suggested ***Are tiered supports required above and beyond tier 1 (included in feedback above)?*** Not applicable, Tier 2 (Pls Specify), Tier 3 (Pls Specify)	If Tier 2 and/or Tier 3, please specify strategies:
9. For multi-year goals only: • What adjustments are needed to the goal(s)? • Why? • How might adjustments impact the timing of the goal(s)?	**10. Choose one (if multi-year goal)** • Leader will continue multi-year goal. • Leader will adjust multi-year goal. • Leader completed multi-year goal. • Notes:

Workflow:

1. Direct Report completes steps 1-2;
2. Evaluator schedules End of Year Conf and completes 3-10 and signature (Eval Approve w/ Date)
3. Direct Report Sign w/Date

Appendix G: Observation/Site Visit Form – Leader

Leader Evaluation Observation/Site		
Leader Name: Populate from Goal setting form	**Leader Location:** Populate from Goal setting form	
Leader Role: Populate from Goal setting form	**Leader Goal/Observation Focus:** Populate from Goal setting form	
1. Choose one (Drop down). • Cohort 1 (Pre-/Post-Conference Required) • Cohort 2 (Post-Conference Required) • Additional Site Visit (Pre-/Post-Conference Optional)		
Pre-Observation/Visit (if necessary) Date _____ *Completed by Leader (as needed/required)*		
2. Meeting Plan and/or Context	*Upload and provide hyperlink here, as appropriate*	
3. Pre-Conference Notes		
4. Observation/Site Visit Evidence Date _____ *Completed by the Evaluator*		
Type evidence here		
Post-Observation/Visit Reflection *Completed by the Leader*		
5. What does today's evidence tell you?		
6. Are there patterns, trends, or outliers?		
7. How will our collaborative reflection help you move forward and apply your learning in your next steps?		
8. Post-Observation/Visit Conference Feedback Date _____ *Completed by the Evaluator*		
Feedback on Evidence, Standards, and Educator's Goal		
9. Evidence of Strengths	**10. Feedback on Single-Point Competency from Goal Setting Form (if observed)** *Completed by the Evaluator*	**11. Areas for Growth and/or Next Steps**
	Insert competencies indicated on #4. Of Goal Setting form.	

Workflow:

6. Direct Report completes steps 1-3;
7. Evaluator schedules site visit pre-conf (if necessary) and site visit, and completes #4.
8. Direct Report completes Post Observation/Site Visit #5-7
9. Evaluator schedules and holds Post Conf and completes #8-11 and signature (Eval Approve w/ Date)
10. Direct Report Sign w/Date

Appendix H Part 1: Corrective Support Plan Template – Leader

Name of Staff Member:

Name of Evaluator:

Names of Supporting Staff (Other Than Evaluator):

Name of WSASA Representative:

Tier 3 Support was provided on the following dates: _____ Despite Tiered Supports _____ has demonstrated a lack of growth/improvement, which has led _____ to assign a Corrective Support Plan.

The staff member received Tier 3 support and has shown a persistent lack of growth and/or reflection in the area of:

Select One from PSEL Standards

Describe the objective for the Corrective Support Plan below. What is the staff member's main area of improvement?

Describe the success criteria for completion of the plan.

Complete the table below to indicate actions steps, timeline, and who will be responsible. Note: Corrective Support Plans have a maximum duration of 30 school days.

Action Step	When will it occur?	Who is responsible?

Progress Monitoring Log: The evaluator should indicate below when they met with the staff member for progress monitoring and describe (briefly) what was discussed.

Meeting #	Date	Notes/ Feedback

What resources will the evaluator, support personnel, and WSASA representative provide?

Signatures below indicate knowledge of this plan: Staff Member, Evaluator, WSASA, and Support/Mentor Personnel

Appendix H Part 2: Corrective Support Plan Sample – Leader

Name of Staff Member:

Principal Ed Rooney

Name of Evaluator:Names of Supporting Staff (Other Than Evaluator):

Superintendent Albus Dumbledore

Name of WSASA Representative:

Mr. Feeny

Tier 3 Support was provided on the following dates: March 1-28, 2024. Despite Tiered Supports, Mr. Ed Rooney has demonstrated a lack of growth/improvement, which has led Superintendent Dumbledore to assign a Corrective Support Plan.

The staff member received Tier 3 Support and has shown a persistent lack of growth and/or reflection in the area of:

Standard 8: Meaningful Engagement of Families & Community

Describe the objective for the Corrective Support Plan below. What is the staff member's main area of improvement?

Mr. Rooney has consistently struggled with communicating appropriately with a variety of constituents

Describe the success criteria for completion of the plan.

Improvements in communication within this six-week duration will serve as criteria for successful completion of this plan.

Complete the table below to indicate actions steps, timeline, and who will be responsible. Note: Corrective Support Plans have a maximum duration of **30 school days**.

Action Step	When will it occur?	Who is responsible?
Progress Reporting & Weekly Feedback on progress	Weekly	Rooney & Dumbledore
Modeling of effective communication practices	Weekly	Feeney
Collaboration with district leaders for exemplars of communication	Weekly	District Leaders, as assigned by Dumbledore

Progress Monitoring Log: The evaluator should indicate below when they met with the staff member for progress monitoring and describe (briefly) what was discussed.

Meeting #	Date	Notes/ Feedback
Meeting#1	May 1	
Meeting#2	May 8	
Meeting#3	May 15	
Meeting#4	May 22	

What resources will the evaluator, support personnel, and WSASA representative provide?

Mr. Feeny and district leaders

Signatures below indicate knowledge of this plan: Staff Member, Evaluator, WSASA, and Support/Mentor Personnel

Educator Evaluation and Support Plan



Vision

All Connecticut educators and leaders have the opportunity for continuous learning and feedback, to develop and grow, both individually and collectively, through the educator and leader evaluation and support system so that all Connecticut students experience growth and success.

The Purpose of this Model Guide

The Connecticut (CT) Model Evaluation and Support Plan is designed to support a comprehensive educator and leader evaluation system adopted by the Connecticut State Board of Education in concert with a wide range of stakeholders and pursuant to educator evaluation regulations. Connecticut General Statutes 10-151b requires that "the superintendent of each local or regional board of education shall annually evaluate or cause to be evaluated each teacher."

The CT Model Evaluation and Support Plan includes tools, guidance, and rubrics to support the evaluation of all educators and leaders. Professional Development and Evaluation Committees (PDECs) can adopt the CT Model Plan, adapt the CT Model Plan, or revise their own evaluation system to align with the CT Guidelines for Educator and Leader Evaluation and Support 2023. It is the intent that this model can serve as a foundation of evaluation and support practice aligned to the 2023 guidelines beginning in the initial year of implementation (2024-25) allowing for PDECs to develop an action plan from self-assessment toward best practices and innovation that will evolve over time. This plan will:

- introduce key components of the educator evaluation framework and the requirements set forth in the regulations;
- outline specific action steps, forms, and tools from the CT Model Evaluation and Support Plan specific to the evaluation of educators; and
- highlight considerations, conditions, and systems necessary for effective implementation at the school/district level.

Guiding Principles

The transformational design of the educator evaluation and support model is grounded in six guiding principles that use high quality professional learning to advance educator practice and student learning, growth, and achievement.

- **Allow for differentiation of roles** *(for example for leaders: assistant superintendents, director of pupil services, various leaders in central office, principal, assistant principal; or for educators: teachers, counselors, instructional coaches, student support staff).*
- **Simplify and reduce the burden** *(eliminate technical challenges, paperwork, steps).*
- **Focus on things that matter** *(identify high leverage goal focus areas)*.
- **Connect to best practices aimed at the development of the whole child** *(including, but not limited to, academic, social, emotional, and physical development).*
- **Focus on educator growth and agency** *(meaningfully engage professionals by focusing on growth and practice in partnership with others aligned to a strategic focus).*
- **Meaningful connections to professional learning** *(provide multiple pathways for participants to improve their own practice in a way that is meaningful and impactful).*
- **Specific, timely, accurate, actionable, and reciprocal feedback.**

Connecticut Guidelines for Educator and Leader Evaluation and Support 2023 Components: Reimagining Educator and Leader Evaluation and Support

The design of the Connecticut Guidelines for Educator Evaluation and Support 2023 (CT Guidelines 2023) are representative of research-based effective practice and include six elements.

- Standards and criteria
- Goal setting process
- Professional practice and educator growth
- Evaluator/observer/stakeholder feedback and engagement
- Process elements
- Dispute resolution

The combined vision, guiding principles, and overall framework for educators and leaders' evaluation and support describe a systematic process of continuous improvement and professional learning leading to high quality professional practice and improved learning, growth, and achievement for students. While components are similar for educators and leaders, there are components specific to educators and to leaders, resulting in two sections with similar processes within a district's evaluation and support system.

Standards and Criteria for Educators

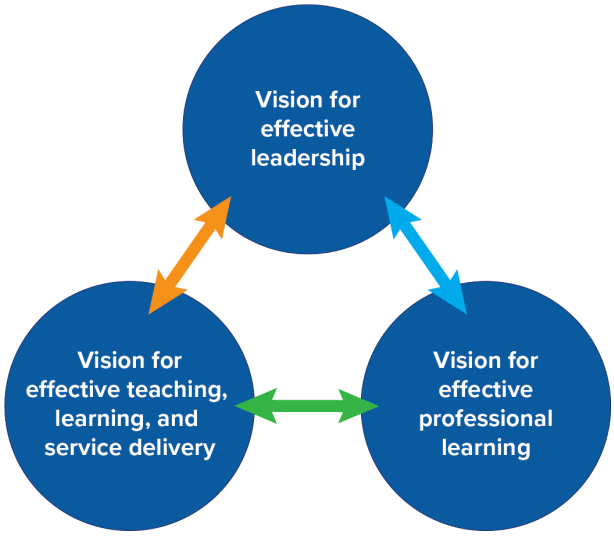
The primary goal of the educator evaluation and support system is to strengthen individual pedagogy and collective practices to increase student learning, growth, and achievement. Educator practice discussions are based on a set of national or state performance standards set by professional organizations and mutually agreed upon by the PDEC. The following professional practice standards ground this model's framework. It is recommended that each PDEC create a process to review the standards and ensure a rubric accompanies the standards. The rubric serves as support for self-evaluation, dialogue, and feedback. While a rubric serves as support for self-evaluation, dialogue, and feedback, it is recommended that a single point rubric is used to provide focus for high leverage goal(s) setting and professional learning.

Educator Standards

1. CCT Rubric for Effective Teaching 2017
2. CCT Rubric for Effective Service Delivery 2017
3. Learning Forward's Professional Learning Standards (2022)
4. Teacher Leader Model Standards (2008)

Professional Learning Standards and Structures

Professional learning is essential to the CT Guidelines 2023 model. Learning Forward Professional Learning Standards 2022, serve as a tool for how professional learning happens to deepen one's knowledge of their practice to impact student learning, growth, and achievement. As a tool, the professional learning standards help educators and leaders intentionally design learning, address content and consider how to accomplish the expected learning transformation desired. Together the professional standards for educators, leaders and professional learning serve as the three visions that work together to lay the foundation for meaningful feedback in a continuous learning process.

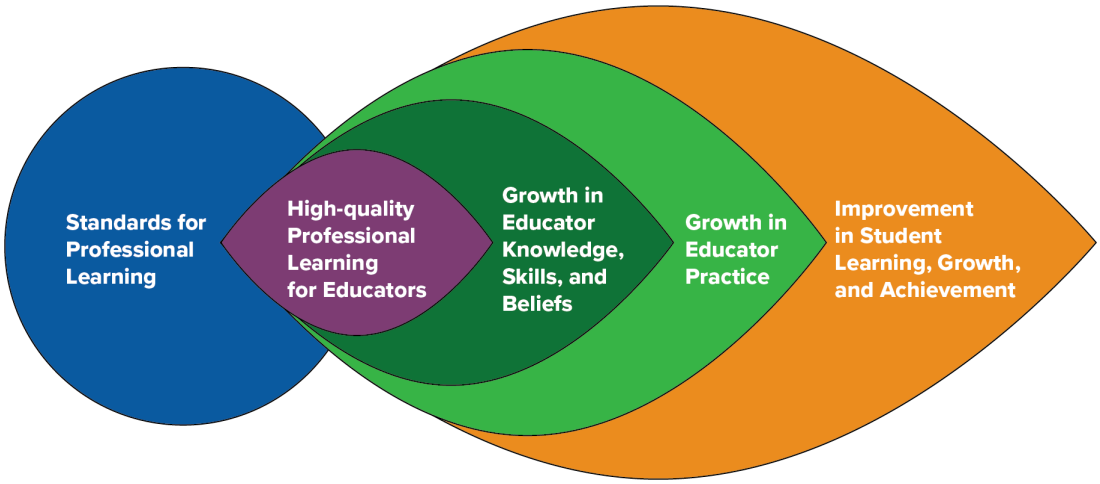


The Continuous Learning Process: Goal Setting, Professional Practice and Evaluator/Observer/ Stakeholder Feedback and Engagement

The evaluation and support model is designed as a continuous learning process The goal of the continuous learning process is to provide educators with continuous learning opportunities for professional growth through self-directed analysis and reflection, planning, implementation, and collaboration. Regular dialogue and feedback, coupled with the opportunity to reflect on and advance practice, drive the continuous learning process. In this process, the educator serves as the learner who actively engages in and directs their learning and feedback. The evaluator serves as a learning partner who supports the educator through the learning and growth process. Within the process, the educator collaborates and serves as a reflective practitioner to determine mutually agreed upon educator goals, professional practice and educator growth, and observation and feedback focus.

During each school year, a minimum of three check-ins provide an opportunity for a reciprocal discussion of what is happening in the classroom or school, a sharing of evidence of professional learning and impact on growth, and identification of needs and mutually agreed upon next steps. The meetings are approached in a spirit of continuous improvement, reflection, and collaboration. Dialogue is important, however, there must be a balance of written and verbal feedback provided between check-ins based on observations and reviews of practice as required by the district plan.

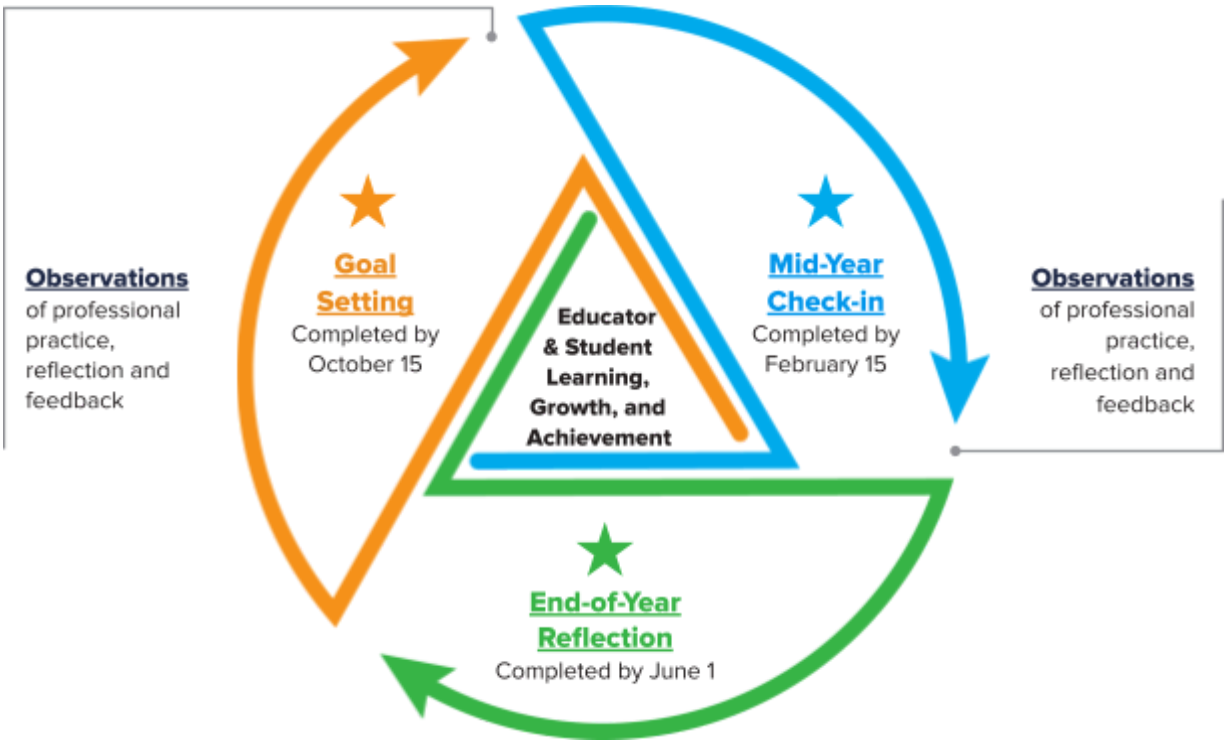
The graphic below, adapted from Learning Forward's Standards for Professional Learning 2022, shows the relationship between professional learning for leaders, educators and students.



Below is a graphic with the associated steps, reflections, and resources associated with each step of the process to assist educators and evaluators through the process. All educators are assigned a primary evaluator (092) who has completed comprehensive orientation on this model and relevant rubrics.

Educator Continuous Learning Process

Evaluation Orientation no later than September 30
Completed prior to the start of the Continuous Learning Process



Goal Setting
Completed by October 15th

Beginning of the Year Goal(s) and Planning
- Self reflect
- Review evidence

Goal(s), Rationale, Alignment, and Professional Learning Plan
- Draft goal(s), rationale, alignment, professional learning plan

Goal Setting Conference
- Mutually agree on 1-, 2-, or 3-year goal(s)
- Determine individual or group goal(s)
- Mutually agree on professional learning needs and support

Mid-year Check-in
Completed by February 15th

Mid-Year Check-in: Reflection, Adjustments, and Next Steps
- Review and discuss currently collected evidence towards goal(s) and of practice
- Review professional learning, evidence, and impact on educator practice, student learning, growth, and achievement

Mid-Year Conference
- Discuss evidence, reflection, and feedback from evaluator
- Adjust and revise as needed

End-of-Year Reflection
Completed by June 1st

End-of-Year Reflection and Feedback Process
- Self-reflection: Review and discuss professional learning, evidence of impact on practice, student learning, growth and achievement

End-of-Year Conference/ Summative Feedback and Growth Criteria
- Evaluator provides written summative feedback and guides next steps
- Annual Summary sign-off

Orientation on the educator evaluation and support process shall take place prior to the start of the process, no later than **September 30th**. The orientation shall include:

- High leverage goal setting and professional learning plans
- Use of rubrics and standards
- Observation of practice/Review of practice
- Tiered supports
- Dispute resolution

Annual training for evaluators as required by C.G.S. 10-151b will include engaging in and providing reciprocal feedback tied to standards and evidence of professional practice.

Appendix T contains an evaluation timeline that shows the deadlines for goal setting, the midyear check-in, and end-of-year reflection portions of the evaluation process.

Goal(s) Setting (Completed by October 15)

The initial goal setting meeting includes a dialogue between the educator and their evaluator around the educator's initial self-reflection, which is based on a review of evidence and an analysis of their own practice to identify and support an area for educator practice and growth, and student learning, growth, and achievement. The educator and evaluator come to mutual agreement on high leverage professional practice one-, two- or three-year goal(s), multiple measures of evidence (at least two measures), professional learning plan, and support that is consistent with their professional status and goals to drive progress toward goal attainment (See Appendix K).

For beginning educators in the Teacher Education and Mentoring (TEAM) Program, consideration for alignment between professional learning and their TEAM modules would enhance their learning and practice.

Midyear Check-in (Completed by February 15):

The midyear check-in consists of reciprocal dialogue between the educator and evaluator and includes an educator self-reflection on their progress toward their goal(s) so far. The reflection shall include an analysis of the impact of their learning on their practice, student learning, growth and achievement and the school community.

- Educators self-reflect and review multiple and varied qualitative and quantitative indicators of evidence of impact on educator's growth, professional practice, and impact on student learning, growth, and achievement with their evaluator.
- The evaluator provides specific, standards-based feedback related to the educator's goal. Observation feedback and evidence are aligned to the single point rubric. (See Appendix S for Template: WPS Single Point Competency* Feedback Form and Sample). *A single point competency is defined in the glossary as **"***a description of a standard of behavior or performance that represents the enduring understanding of content and skill from a specific domain that is* ***framed only as a single set of desired outcomes rather than laid out across a rating or scale of performance***."
- The midyear conversation is a crucial progress check-in. The midyear check-in provides an opportunity to discuss evidence, learning, and next steps. It is at this point that revisions to the educator's goal(s) may be considered based on multiple measures of evidence.

End-of-Year Reflection/Summative Review (Completed by June 1)

End-of-year reflection provides an opportunity for the educator and evaluator to engage in reciprocal dialogue, similar to the midyear check-in, to discuss progress toward the educator's goal(s); professional learning as it relates to the educator's professional growth and professional practice; and impact on student learning, growth, and achievement as evidenced by multiple and varied qualitative and quantitative indicators of evidence. A written end-of-year summary includes the impact of new learning on educator practice and growth, impact on student learning, growth and achievement, school community, strengths and concerns, and possible next steps for the upcoming year. Analysis of evidence from the end-of-year summary is important for the educator's subsequent self-assessment and goal setting revisions or new goal.

The evaluator provides a concise summary based upon evidence related to the mutually agreed upon educator goal(s) and identified standards and will make a distinction regarding the educator's successful completion of the professional learning process.

Professional Practice and Educator Growth

The implementation of the continuous learning process is shared between the educator and evaluator. For the duration of the learning process, educators pursue learning and attainment of their goal(s), collecting evidence of practice related to their high leverage professional learning goal. Evaluators will provide educators with feedback from observation and dialogue, ensure timely access to supports, and collect evidence of educator performance and practice toward goal(s) through multiple sources, which include observation and may include student, staff, or family feedback (See Appendix J).

Observation of Professional Practice and Feedback

Observations occur throughout the continuous learning process. The identified high leverage educator goal(s) provides a focus for strategic evidence collection and feedback. Evaluators provide educators with specific feedback based on evidence, standards, and the educator's goal; ensure timely access to planned support(s); and continue to collect evidence of educator practice and progress toward goal(s) through multiple sources of evidence, including observation. Verbal feedback is provided within five school days and written feedback in the district evaluation platform within ten school days.

"Feedback is defined as a dynamic, dialogic process that uses evidence to engage a learner, internally or with a learning partner, in constructing knowledge about practice and self. Its primary purpose is learning that guides change" (Killion, 2019).

Quality feedback:

- Is based on multiple and varied quantitative and qualitative indicators of evidence, standards, and goal(s)
- Is personalized
- Is learning-focused or growth-oriented
- Provides questions for reflection to refine or revise strategies
- Expands understanding of one's experiences and their implications for future experiences
- Provides reflective opportunities to rework, refine, and reorder knowledge, attitudes, skills, and/ or practices
- Is timely, frequent and reciprocal

Definition of Cohorts	
Cohort 1 **Who:** ● New to profession (first four years) ● New to LEA (first two years) **What:** ● A minimum of 3 observations of professional practice (minimum of 30 minutes in length) with pre- and post- meetings. ○ One observation of professional practice may be substituted with a review of practice. ● Verbal feedback within 5 school days and written feedback within 10 school days. ● Additional observations of professional practice as mutually agreed upon or deemed necessary	**Cohort 2** **Who:** ● Educators who have successfully completed Cohort 1 in their current LEA **What:** ● A minimum of 2 observations of professional practice (minimum of 20 minutes in length) with post- meetings. ○ One observation of professional practice may be substituted with a review of practice. ● Verbal feedback within 5 school days and written feedback within 10 school days. ● Additional observations of professional practice as mutually agreed upon or deemed necessary

Growth Criteria

An educator is determined to have successfully completed the learning process by demonstrating:

- Reflection supported with evidence of the impact of the educators' new learning on their practice/goal.
- The impact the educators' new learning and practice had on student learning, growth, and/or achievement, supported by evidence.
- Next steps.

(See Appendix K)

Tiered Support and Corrective Support Planning

All educators require access to high-quality, targeted professional learning support to improve practice over time. Educators and their evaluators thoughtfully consider and apply three tiers of support, as appropriate, within an evaluation process. All three tiers of support must be implemented prior to the development of a Corrective Support Plan.

A pattern of persistent lack of growth and reflection or resistance to growth-oriented feedback should lead to advancing levels of support with a defined process for placing an educator on a Corrective Support Plan with indicators of success for transitioning out of it. Evaluators must utilize and document all three tiers of support prior to the development of a Corrective Support Plan. The Corrective Support Plan shall be developed in consultation with the evaluator, educator, and their exclusive bargaining representative if applicable.

Tier 1 (Includes All Educators)

It is the expectation that all educators consistently access opportunities for professional growth within their district. Tier 1 supports are broadly accessible professional learning opportunities for all, inclusive of, but not limited to, collegial professional conversations, classroom visits, available district resources (e.g., books, articles, videos etc.), formal professional learning opportunities developed and designed by district PDEC, and other general support for all educators (e.g., instructional coaching). These resources should be identified through a goal setting process by mutual agreement.

Tier 2 (Initial Support)

In addition to Tier 1, Tier 2 supports are more intensive in duration, frequency, and focus (e.g., engaging in a professional learning opportunity, observation of specific classroom practices, etc.) that can be either suggested by the educator and/or recommended by an evaluator. The teacher will have up to 15 school days to demonstrate that they have taken steps to improve their practice. They will meet with their evaluator at the end of the 15 days to provide evidence of their improvement, receive feedback, and determine next steps. The teacher has the option of including union representation in the Tier 2 support process.

Tier 3 (Intermediate Support)

In addition to Tier 1 and Tier 2, Tier 3 supports are put in place to respond to unresolved, previously discussed concerns that are collaboratively discussed and may be assigned by an evaluator. Tier 3 supports have clearly articulated areas of focus, duration of time, and criteria for success. All three tiers of supports must be documented and completed prior to movement to a Corrective Support Plan. Tier 3 supports shall be developed in consultation with the evaluator, educator, and their exclusive bargaining representative for certified educators chosen pursuant to C.G.S. §10-153b. The educator has a maximum of 30 school days to complete their Tier 3 Support Plan. The start date and duration of time an educator is receiving this level of support should be clearly documented. See Appendix P for the required template for the Tier 3 Support Plan. The educator will meet with their evaluator at the end of the 30 days to provide evidence of their improvement, receive feedback, and determine next steps. During this Tier 3 progress review, a decision can be made to move to a Corrective Support Plan due to continued lack of growth/resistance to growth.

Corrective Support Plan

In addition to Tier 1, Tier 2, and Tier 3, a pattern of persistent lack of growth and reflection or resistance to growth-oriented feedback should lead to advancing levels of support with a defined process for placing a leader on a

Corrective Support Plan with indicators of success for transitioning out of it. Evaluators must utilize and document all three tiers of support prior to the development of a Corrective Support Plan. The Corrective Support model includes:

- clear objectives specific to the well documented area of concern,
- resources, support, and interventions to address areas of concern,
- timeframes for implementing the resources, and
- supportive actions from the evaluator.

Corrective supports shall be developed in consultation with the evaluator, educator, and their exclusive bargaining representative for certified educators chosen pursuant to C.G.S. §10-153b. The start date and duration of time an educator is receiving this level of support should be clearly documented. See Appendix Q for the required template for the Corrective Support Plan. The educator has a maximum of 30 school days to complete their Corrective Support Plan. At the conclusion of the Corrective Support Plan period, a number of outcomes are possible as determined in consultation with the evaluator, educator, and bargaining unit representative.

Dispute Resolution

The purpose of the dispute resolution process is to secure at the lowest possible administrative level equitable solutions to disagreements, which from time to time may arise related to the evaluation process. The right of appeal is available to all in the evaluation and support system. As our evaluation and support system is designed to ensure continuous, constructive, and cooperative processes among professional educators, educators/leaders and their evaluators are encouraged to resolve disagreements informally.

Ultimately, should an educator disagree with the evaluator's assessment and feedback, the parties are encouraged to discuss these differences and seek common understanding of the issues. As a result of these discussions, the evaluator may choose to adjust the report but is not obligated to do so. The educator being evaluated has the right to provide a statement identifying areas of concern with the goals/ objectives, evaluation period, feedback, and/or professional development plan, which may include the individual professional learning plan or a Corrective Support Plan.

Any such matters will be handled as expeditiously as possible, and in no instance will a decision exceed 30 workdays from the date the educator initiated the dispute resolution process. Confidentiality throughout the resolution process shall be conducted in accordance with the law.

Process

The educator being evaluated shall be entitled to collective bargaining representation at all levels of the process and must inform their evaluator of a dispute within 10 school days of receiving feedback.

1. Then, within three school days of articulating the dispute in writing to his/her/their evaluator, the educator being evaluated and the evaluator will meet with the objective of resolving the matter informally.
2. If there has been no resolution, the individual may choose to continue the dispute resolution process in writing to the superintendent or designee within three workdays of the meeting with his/her/their evaluator (step 1). The educator being evaluated may choose between two options.

The required dispute meeting agenda template (See Appendix R) should be completed by the evaluator, PDEC committee, neutral party, or superintendent prior to the meeting.

Option 1:

The issue in dispute may be referred for resolution to a subcommittee of the Professional Development and Evaluation Committee (PDEC), which will serve as a neutral party*. The superintendent and the respective collective bargaining unit for the district may each select one representative from the PDEC to constitute this subcommittee, as well as a neutral party as mutually agreed upon between the superintendent and the collective bargaining unit. It is the role of the subcommittee to determine the resolution of the dispute and to identify any actions to be taken moving forward.

**In the instance that a district is too small to have a full PDEC from which to select three individuals, the superintendent and educator may select three mutually agreed upon persons to serve as the neutral party for resolving the dispute. Each individual must be a Connecticut certified educator and may or may not be from within the district.*

Option 2:

The educator being evaluated requests that the superintendent solely arbitrate the issue in dispute. In this case, the superintendent will review all applicable documentation and meet with both parties (evaluator and educator being evaluated) as soon as possible, but no longer than five school days from the date of the written communication to the superintendent. The superintendent will act as arbitrator and make a final decision, which shall be binding.

Time Limits

1. Since it is important that appeals be processed as rapidly as possible, the number of days indicated within this plan shall be considered maximum. The time limits specified may be extended by written agreement of both parties.
2. Days shall mean workdays. Both parties may agree, however, to meet during breaks at mutually agreed upon times.
3. The educator being evaluated must initiate the appeals procedure within 10 workdays of the scheduled meeting in which the feedback was presented. If no written initiation of a dispute is received by the evaluator within 10 workdays, the educator shall be considered to have waived the right of appeal.
4. The educator being evaluated must initiate each level of the appeal process within the number of days indicated. The absence of a written appeal at any subsequent level shall be considered as waiving the right to appeal further.

The Role of the Professional Development and Evaluation Committee (PDEC)

The PDEC serves as the collaborative decision maker using the consensus protocol to create, revise, and monitor the evaluation and support model, as well as the professional learning plan.

Pursuant to Connecticut General Statute 10-220a and Public Act 23-159 Section 11 (b) (3), each local and regional board of education must establish a professional development and evaluation committee (PDEC) to include at least one teacher and one administrator, selected by the exclusive bargaining representative for certified employees, at least one paraeducator selected by their exclusive bargaining representative, and other personnel as the local board deems appropriate. It is vital that individuals selected as delegates for administrators, teachers, and other school personnel are representative of the various classifications within the groups (see examples below).

Other School Personnel	Educator	Leader
• Attendance counselor • Paraeducator (required) • Behavior technician • Parent and family liaison • Social emotional support staff	• Classroom teacher • CTE teacher • Library media specialist • Reading interventionist • Instructional coach • Special education teacher • Social worker • School psychologist • Speech pathologist	• Principal • Assistant principal • TESOL supervisor • Special education supervisor • Assistant superintendent • Curriculum coordinator • Talent development super- visor

The duties of PDECs shall include, but are not limited to:

- participation in the development or adoption of a teacher evaluation and support program for the district, pursuant to section 10-151b;
- the development, evaluation, and annual updating of a comprehensive local professional development plan for certified employees of the district; and
- the development and annual updating of a comprehensive local professional development plan for paraeducators of the district.

The educator and leader evaluation and support program shall be developed through mutual agreement between the local or regional board of education and the PDEC. If the local or regional board of education and the PDEC are unable to come to mutual agreement, they shall consider the model educator and leader evaluation and support program adopted by the State Board of Education and may, through mutual agreement, adopt such model educator and leader evaluation and support programs.

If the local or regional board of education and the PDEC are unable to mutually agree on the adoption of the State Board of Education's model program, then the local or regional board of education shall adopt and implement an educator and leader evaluation and support program developed by such board, provided that the program is consistent with the CT Guidelines 2023 adopted by the State Board of Education.

Local and State Reporting

The superintendent shall report:

1. the status of teacher evaluations to the local or regional board of education on or before the last Board of Education meeting of each school year; and
2. the status of the implementation of the teacher evaluation and support program, including the frequency of evaluations, the number of teachers who have not been evaluated, and other requirements as determined by the Department of Education, to the Commissioner of Education on or before September 15 of each year.

For purposes of this section, the term "teacher" shall include each professional employee of a board of education, below the rank of superintendent, who holds a certificate or permit issued by the State Board of Education.

Technical Assistance and Professional Learning

The CSDE works closely with schools and districts to learn what support is most needed for effective implementation of the CT Guidelines 2023 framework. To that end, the CSDE continues to develop re- sources in partnership with the six regional educational service centers, ACES, CES, CREC, EASTCONN, EdAdvance, and LEARN along with CAS and feedback from districts. You are encouraged to reach out for technical assistance and professional support during the transition to this new framework.

Appendices — Educator:

Information and Resources to Support Effective Implementation

Appendix I: Sample Reflection Questions – Educator

Self-Reflection Sample Questions

- Thinking about the success and challenges you may have encountered last year, or at the start of this year, what questions do you have about teaching and learning? What new learning might you want to explore to inform your understanding of these questions and professional practice?
- In reviewing the rubric, what areas emerge as opportunities for your professional learning and practice?
- Based on your current students'/adult learners' strengths and needs, what new learning might you explore to address the needs?
- Based on knowledge of your students/adult learners, and/or knowledge of school/program goals, are there any new strategies or methods you'd like to explore and implement this year?
- How do you see yourself contributing to the school or district's mission, vision, and/or Portrait of a Graduate and what strategies can you learn more about to support that focus?
- What are you considering for your learning goal?
- What will it look like when you achieve your goal?

Professional Learning and Action Questions

Indicators of Success

- What question will you focus on to address your goals?
- What are the criteria for an accomplished practice?
- How do you plan to collect and analyze evidence to assess progress toward your goals?
- What research/professional readings might you explore to support your professional learning and achieve your goal?
- What specific professional learning might you need to achieve your goal?
- What support might you need from your colleagues, supervisor, others? How frequently?
- How might you apply your learning to practice? How often?

Determine Evidence

- What evidence might you collect and analyze to understand progress toward your goal? Quantitative or qualitative or both?
- What ways would you like me as your evaluator to collect data/evidence for feedback?
- From how many different situations should we examine data/evidence?
- What are the advantages and disadvantages of the identified evidence?
- How will the data help us to analyze your practice?
- What is your timeline for collecting this evidence and measuring impact?
- What are the anticipated challenges or obstacles, and how do you plan to address them?
- How might you communicate/share your professional learning to your colleagues or families?
- What opportunities for professional learning do you believe would be beneficial for your growth as an educator?
- In what ways can we encourage collaboration and communication among colleagues to promote a culture of sharing best practices?

Analysis of Evidence

- What do you observe in your evidence?
- What patterns, themes, or outliers do you notice?
- What does the evidence say about how you are doing in relation to your goal and indicators of success?
- Based on the evidence and your practice overall, what are your strengths?
- In what aspect do you want to continue to grow or refine your knowledge, skill, practice?

Learning Reflection and Next Steps

- What is clear to you now?
- What are you learning?
- What do you understand now that you didn't understand as clearly before?
- How will this learning influence future actions?
- What is a single sentence conclusion that represents your learning?
- Under what circumstance might this conclusion not be true?
- What are ways you continue to refine your practice?
- What more do you want to learn and practice?
- How might you accomplish that? What is your next plan?
- What resources and support do you want or need?
- Once learning has been implemented: What effect did the learning have on practice, students?

Reflect on the Feedback Process

- In what ways did my engagement with you support your learning?
- What did I do as a learning partner that helped you as a learner and how did it help?

Appendix J: Definition of Cohorts – Educator

Definition of Cohorts	
Cohort 1 **Who:** ● New to profession (first four years) ● New to LEA (first two years) **What:** ● A minimum of 3 observations of professional practice (minimum of 30 minutes in length) with pre- and post- meetings. ○ One observation of professional practice may be substituted with a review of practice. ● Verbal feedback within 5 school days and written feedback within 10 school days. ● Additional observations of professional practice as mutually agreed upon or deemed necessary	**Cohort 2** **Who:** ● Educators who have successfully completed Cohort 1 in their current LEA **What:** ● A minimum of 2 observations of professional practice (minimum of 20 minutes in length) with post- meetings. ○ One observation of professional practice may be substituted with a review of practice. ● Verbal feedback within 5 school days and written feedback within 10 school days. ● Additional observations of professional practice as mutually agreed upon or deemed necessary

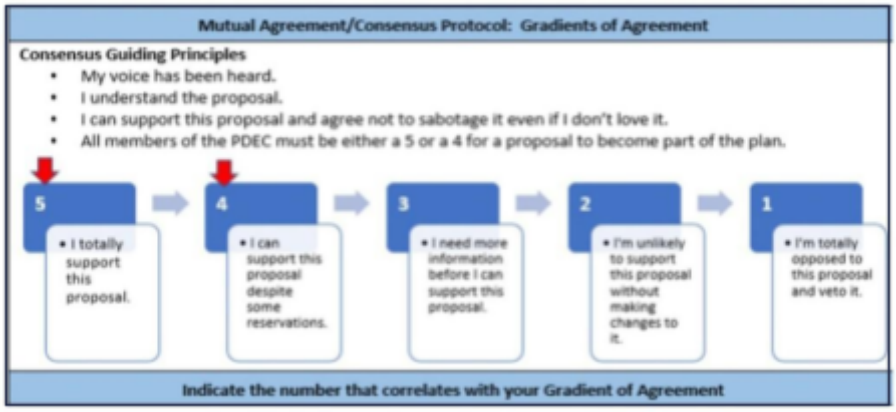
Appendix K: Growth Criteria and Sources of Evidence – Educator

Growth Criteria	Possible Sources of Evidence
Development of New Learning and Impact on Practice Educator can demonstrate how they developed new learning within the continuous learning process through multiple sources (e.g., analyzing student learning, observational feedback, etc.) and how they used their new learning to improve practice aligned to their continuous learning process goal/strategy focus. **Impact on Students** Educator can demonstrate how they positively impacted student learning within the continuous learning process using example evidence and can articulate connections/rationale between the improved learning and their own changes in practice.	● Required observational evidence ● Required student learning evidence aligned to high-leverage indicator focus ● Implementation plans/lesson plan(s) ● Educator learning logs/impact on practice reflection ● Educator created learning materials ● Evidence from Observation of Educator Practice ● Numeric information about schedule, time, educator practice, student participation, resource use, classroom environment, frequency of meetings/communications, etc. ● Educator and/or student self-reflection ● Student learning artifacts ● Mastery-based demonstrations of achievement ● Observational evidence of students' words, actions, interactions (including quotations when appropriate) ● Rubrics, interim or benchmark assessments, other assessments ● Other artifacts/sources

Appendix L: General Glossary – Educator

consensus protocol: Consensus decision-making is a creative and dynamic way of reaching agreement in a group. Instead of simply voting for an item and having the majority getting their way, a consensus group is committed to finding solutions that everyone actively supports — or at least can live with.

By definition, in consensus no decision is made against the will of an individual or a minority. If significant concerns remain unresolved, a proposal can be blocked and prevented from going ahead. This means that the whole group has to work hard to find win-win solutions that address everyone's needs.



From Consensus decision making. Seeds for Change. (n.d.).

https://www.seedsforchange.org.uk/consensus

continuous learning process: The continuous learning process is a cycle of feedback, reflection, goal setting, opportunities for professional learning, feedback from observations (peers or evaluators), and a collection of multiple measures of evidence. There are multiple models of continuous learning including, but not limited to:

- The Supporting Teacher Effectiveness Project (STEP)
- Massachusetts Department of Elementary and Secondary Education 5-Step Cycle and Model System for Educator Evaluation
- Ohio Department of Education - Ohio Teacher Evaluation System (OTES 2.0) Framework
- Tennessee Educator Acceleration Model
- Connecticut TEAM Model (CAPA)

Corrective Support Plan: A pattern of persistent lack of growth and reflection or resistance to growth-oriented feedback should lead to advancing levels of support with a defined process for placing an educator on a Corrective Support Plan with indicators of success for transitioning out of it. The Corrective Support Plan shall be developed in consultation with the educator and their exclusive bargaining representative for certified teachers chosen pursuant to C.G.S. §10-153b. Corrective Support Plans shall include clear objectives specific to the well documented area of concern; resources, support, and interventions to address the area of concern; timeframes for implementing the resources, support, and interventions; and supportive actions from the evaluator.

check-ins: Formal or informal meetings or conferences held in the spirit of collaboration between the leader and evaluator and to engage in reciprocal dialogue regarding what is happening in one's practice at that mo- ment in time including goal(s), professional learning, multiple and varied forms of quantitative and qualitative evidence, adjustments, and next steps (i.e., classroom/school/building or district). During each school year, a minimum of three check-ins provide an opportunity for discussions to set and adjust goals, celebrate growth and positive impact, identify needs, assess and discuss evidence of learning, and next steps in one's learning.

community: A school community typically refers to the localized group of students, educators, parents, and staff within a specific school, fostering a sense of belonging and shared objectives within that school.

A district community encompasses a broader scope, involving multiple schools within a school district, and often includes administrators, teachers, students, and families collaborating across various educational schools and programs within that district. The district community addresses overarching educational policies, resource allocation, and coordination among multiple schools and programs to promote consistent and effective education across a larger administrative unit.

dispute resolution: A process for resolving disputes in cases where the evaluator and educator being evaluated cannot agree on goals/objectives, the evaluation period, feedback, or the professional learning plan or other outcomes of the evaluation process.

evidence: Evidence collected and presented as a part of the evaluation system may include (but is not limited to) artifacts, observations of practice, student feedback, and reflections of the educator on student learning, growth, and achievement as part of the educator feedback process.

feedback: "Feedback is defined as a dynamic, dialogic process that uses evidence to engage a learner, internally or with a learning partner, in constructing knowledge about practice and self. Its primary purpose is learning that guides change" (Killion, 2019).

Quality Feedback:

- Is based on multiple and varied quantitative and qualitative indicators of evidence, standards, and goal(s)
- Is personalized
- Is learning-focused or growth-oriented
- Provides questions for reflection to refine or revise strategies
- Expands understanding of one's experiences and their implications for future experiences
- Provides reflective opportunities to rework, refine, and reorder knowledge, attitudes, skills, and/or practices
- Is timely, frequent, and reciprocal

From Killion, J. (2019). *The feedback process: Transforming Feedback for Professional Learning*. Learning Forward.

formal observations: A formal observation is a structured and planned process of watching, assessing, and evaluating an educator's performance. This typically includes a pre-conference and post-conference and results in a written evaluation within 10 school days.

goals and standards: Goals and standards should be based on an evidence based, high leverage strategy or practice aligned with professional practice standards and consistent with the goals of the district. Clear alignment between district, school, and certified staff goals (departments, grade-level teams, or collaborations) improves the collective effectiveness of professional practice.

growth criteria: Successful completion of the Continuous Learning Process, supported with evidence that includes the impact the educators' new learning had on their practice/goal, along with a reflection on challenges and next steps, and the impact the educators' new learning and practice had on student learning, growth, and or achievement, supported by evidence.

high leverage goal: High leverage goals are based on professional practice standards and are transferable across roles, disciplines, and positions and aligned to a strategic focus (i.e., a portrait of a graduate). They address strategies for developing conceptual understanding and have a high standard deviation effect size (Hattie 2009).

informal observations: An informal observation is an unplanned visit intended to evaluate educator per- formance. This typically includes either verbal or written feedback provided to the educator within five school days.

leader: A leader is defined as someone in a leadership position who has attained the 092 certification. This may include superintendent, principal, dean of students, assistant/vice principal, pupil services director, department chair. This is not an exhaustive list, rather to illustrate the definition. Superintendents will confirm district leaders with evaluation roles.

multiple measures: Can include, but is not limited to, student learning, educator learning, cultural changes, growth, and achievement as mutually agreed upon during the goal-setting process and may include additional evidence relative to one or more competencies.

mutual agreement: An agreement or condition that is reciprocal or agreed upon by all parties.

organizational health: Organizational health in schools and districts means how well the whole school system is functioning. It encompasses various interconnected elements that contribute to a positive and thriving learning environment, including leadership, culture and climate, communication, professional learning, resource management, collaboration and teamwork, student-centered focus, continuous improvement, community engagement, and innovation.

PDEC (Professional Development and Evaluation Committee): The Professional Development and Evaluation Committee serves as the collaborative decision maker to create, revise, and monitor the evaluation and support program for the district, as well as the professional learning plan for certified employees of the district.

professional learning: Professional learning and growth are centered around accelerating personal and collective learning and closing the knowing-doing gap for leaders and educators. This includes co-designing interactive, sustained, and customized learning growth opportunities that are grounded in the evidence that is most needed and most effective. See also Appendix M, Glossary of Professional Learning Opportunities.

review of practice: Reviews of practice are non-classroom observations and may include, but are not limited to, observation of delivery of professional learning, data team meetings, observations of coaching/ mentoring sessions, review of educator work and student work, or review of other educators' artifacts.

rubric: A rubric is a systematic and standardized tool, designed as a continuum, and is used to communicate the performance of educators based on specific criteria. It can be used to evaluate a single criterion to emphasize specific expectations and provide targeted feedback for improvement. It can encourage a growth mindset.

single point competency: A description of a standard of behavior or performance that represents the enduring understanding of content and skill from a specific domain that is framed only as a single set of desired outcomes rather than laid out across a rating or scale of performance.

student outcomes: Student outcomes include multiple measures of student learning, growth, and achievement as mutually agreed upon during the goal setting process.

tiered support:

- Tier 1 (Includes all educators) It is the expectation that all educators consistently access opportunities for professional growth within their district. Tier 1 supports are broadly accessible professional learning opportunities for all, inclusive of, but not limited to, collegial professional conversations, classroom visits, available district resources (e.g., books, articles, videos etc.), formal professional learning opportunities developed and designed by your district PDEC, and other general support for all educators (e.g., instructional coaching). These resources should be identified through a goal setting process by mutual agreement.

- Tier 2 In addition to Tier 1, Tier 2 supports are more intensive in duration, frequency and focus (e.g., attending a workshop, observation of specific classroom practices, etc.) that can be either suggested by the educator and/or recommended by an evaluator.
- Tier 3 Tier 3 supports are responsive to previously discussed concerns and are assigned by an evaluator. Tier 3 supports have a clearly articulated area of focus, duration of time, and criteria for success.

Appendix M: Glossary of Professional Learning Opportunities – Educator

High quality professional learning enhances both educator practice and outcomes for each and every student. High quality professional learning integrates research on effective adult learning and uses interactive, flexible designs to achieve intended outcomes.

advanced coursework: Courses offered at a college, university, or other institution, in person or online, which further educator skills and/or provide professional training.

case study: A team that engages in a case study using information in a student's cumulative folder or other documented information with the intention of determining next steps, i.e., IEP review or attendance records.

coaching: A process based on trust in which professional colleagues work together to reflect on current practices; expand, refine, and build new skills; share ideas; teach one another; conduct classroom re- search; or solve problems.

examination of student work: Individuals or groups of educators review samples of work from various students. They identify strengths, areas for improvement, and design instructional plans as a result of the examination.

job-embedded: Any activity that is tied in with authentic classroom practice. May include, but is not limited to:

- Examining student data
- Mentoring
- Book study (see below)
- Co-planning
- Investigating print and online resources
- Self-reflection
- Visitations/observations within a school

lesson study: Groups of teachers planning a lesson, observing one present the lesson, and then reflecting on it afterwards.

mentoring: A relationship between a less experienced educator and a more experienced mentor, in which the mentor provides guidance and feedback regarding practice.

peer observation: An opportunity for teachers to observe each other during classroom instruction. Teachers may want to observe peers to see a new teaching strategy in action, learn a new model of instruction, or analyze classroom processes and procedures.

personal professional reading: Individual, self-driven reading and processing of texts, in order to improve one's own teaching practice.

professional literature study: Structures and collaborative processes in which individuals or groups of professionals engage in the examination and discussion of a relevant and informative text. The purpose of this study is to promote continuous learning, professional development, and the exchange of ideas and best practices within a specific field or industry. By engaging in a professional book study, individuals can deepen their understanding of key concepts, stay current in their field, and enhance their ability to apply new knowledge to their professional practice. This collaborative and structured approach to learning helps foster a culture of continuous improvement and professional growth within a community of practitioners.

protocols: A learning tool that is rule-based. Often implemented to aid in new learning for groups or individuals. May include article discussions, case studies, book reviews, and other procedures used in its workshops and other learning designs.

school visits: Observation of practice or teaching at a different school or institution to gain new knowledge, ideas, or activities.

student shadow: Follow a particular student during the academic day for a designated time, for a particular identified purpose, i.e., engagement.

walkthroughs: A team of leaders who visit classrooms to find evidence for a particular problem of practice. This evidence is reviewed, and next steps are determined as a result of this practice.

web-based learning: Use of online resources or learning activities to develop new learning or techniques for the classroom.

workshops: Meetings where participants are involved in group discussions or learning experiences and are normally organized around one or more theme areas. Workshops allow participants with differing values and priorities to build a common understanding of the problems and opportunities confronting them. May take place at school or outside.

Appendix N: Continuous Learning Process – Educator

Evaluation Orientation

Orientation to Educator Evaluation was completed on:

Date No later than September 30th

Non-negotiable Process Element of the CT Guidelines (2023)

All forms below are available to be completed in the Vector Evaluation platform.

- Educator Goal-Setting Form
- Educator Observation Form
- Educator Mid-Year Check-In Form
- Educator End-of-Year Self-Reflection and Conference For

1. TASK: Educator Goal Setting Form

Educator Name:	Educator School:		
Educator Role:			
• **1. Select One:** ◦ Cohort 1 *New to profession (first four years *New to LEA (first two years) ◦ Cohort 2 *Educators who have successfully completed Cohort 1	• **2. Select One:** ◦ Individual goal ◦ Collaborative goal **Was this decided upon mutual agreement?**	• **3. Select One:** ◦ 1-year goal ◦ 2-year goal ◦ 3-year goal **Was this decided upon mutual agreement?**	**Select One**: • CCT Rubric for Effective Teaching 2017 • CCT Rubric for Effective Service Delivery 2017 • Learning Forward's Professional Learning Standards (2022) • Teacher Leader Model Standards (2008)
Beginning of the Year Goals & Planning			
Self-Reflection *Completed by Educator*: See Self-Reflection sample reflection questions (Appendix I: Sample Reflection Questions-Educator)			
• 4. Capture your self-reflection here; consider using the Sample Questions found within the model to guide your thinking. *See Examples of Evidence Types (Appendix K: Growth Criteria and Sources of Evidence-Educator)*			
Goal, Rationale, Alignment and Professional Learning Plan *Completed by Educator*			
• 5. Based on your analysis above, what is/are your goal(s)? Include a rationale for the length of your goal (1, 2, 3 year).			
• 6. What evidence of leader learning, educator learning, and/or student growth and achievement, and/or organizational measures will you use to reflect, monitor, and adjust your goal? What is your learning plan to support achieving your goal? See Professional Learning & Action Questions to guide your plan. *(Appendix I: Sample Reflection Questions - Educator)*			
• 7. What evidence will you use to reflect, monitor, and adjust your goal(s)?			
• 8. For multi-year goal(s), what might be the potential focus of years 2 and 3 (to be revisited and revised annually and as needed throughout the learning process)?			
• 9. In what ways might this goal(s) contribute to the school and/or district's vision, mission, and strategic goals?			
Goal Setting Conference **Date** _____ *Completed by Evaluator by October 15.*			
• 10. What is the rubric and standard you chose on which your observations will focus? In addition, please copy and paste below the text from the Proficient/Effective column for your selected standard. This is the single point competency on which your observations will focus.	11. Evaluator Notes Supports Required/Suggested ☐ Tier 1 ☐ Tier 2 ☐ Tier 3		

Workflow

1. Direct Report completes steps 1-9
2. Evaluator schedules goal setting conference and completes 10 and signature (Eval approve w/Date)
3. Direct Report sign with date

2. TASK: Educator Observation Form#1

Educator Evaluation Observation #1 – Required		
Educator Name: Populate from Goal setting form	**Educator Location:** Populate from Goal setting form	
Educator Role: Populate from Goal setting form	**Educator Goal/Observation Focus:** Populate from Goal setting form	
1. Choose one (Drop down). • Cohort 1 (Pre-/Post-Conference Required) Observation minimum is 30 minutes. • Cohort 2 (Post-Conference Required) Observation minimum is 20 minutes. • Additional Site Visit (Pre-/Post-Conference Optional)	2. Observation Focus	
Pre-Observation (if necessary) Date _____ *Completed by Educator (as needed/required)*		
3. Meeting Plan and/or Context	*Upload and provide hyperlink here, as appropriate*	
4. Pre-Conference Notes including identified competency focus for the observation		
Observation Evidence Date _____ *Completed by the Evaluator*		
5. Observation Notes and Evidence		
Post-Observation Reflection *Completed by the Educator*		
6. What worked and how do you know?		
7. What didn't work and how do you know?		
8. What have you learned (about your practice and your learners based on what evidence) and how will you apply that learning in the future?		
Post-Observation Conference Feedback Date _____ *Completed by the Evaluator*		
9. Feedback on Evidence, Standards, and Educator's Goal		
10. Evidence of Strengths	**11. Aeas for Growth and/or Next Steps**	**12. Feedback on Single-Point Competency from Goal Setting Form (if observed)** *Completed by the Evaluator*
		Insert competencies indicated on #4. Of Goal Setting form.

Workflow:

1. Evaluator completes step 1. Direct Report completes steps 2-3.
2. Evaluator schedules site visit pre-conf (if necessary) and Observation, and completes #4.
3. Direct Report completes Post Observation #5-7
4. Evaluator schedules and holds Post Conf and completes #8-11 and signature (Eval Approve w/ Date)
5. Direct Report Sign w/Date

3. TASK: Educator MidYear Form

Leader Name: Populate from Goal setting form	**Leader Location:** Populate from Goal setting form
Leader Role: Populate from Goal setting form	**Leader Goal/Observation Focus:** Populate from Goal setting form

Midyear Check-in: Reflection, Adjustment(s), and Next Steps

Completed by Leader

Non-negotiable Process Element of the CT Guidelines (2023)

See Self-Reflection sample reflection questions (Appendix I: Sample Reflection Questions - Educator) and Professional Learning and Action Questions (Appendix I: Sample Reflection Questions - Educator)

What has been your progress to date on your professional learning plan and your goal(s), and how do you know? What are your next steps (including any adjustments) and why?	**1. Self-Reflection:**

2. Links to Evidence:

Midyear Conference Date _____

Completed by Evaluator (By February 15)

3. **Feedback to Educator** (Feedback regarding progress on professional learning and progress toward goal(s) as well as any adjustments to focus areas result from the discussion. Include change in tiered supports, if recommended.):

Workflow:

1. Direct Report completes steps 1-2;
2. Evaluator schedules Midyear Conf and completes 3 and signature (Eval Approve w/ Date)
3. Direct Report Sign w/Date

4. TASK: Educator Observation Form#2

Educator Evaluation Observation #2 – Required		
Educator Name: Populate from Goal setting form	**Educator Location:** Populate from Goal setting form	
Educator Role: Populate from Goal setting form	**Educator Goal/Observation Focus:** Populate from Goal setting form	
1. Choose one (Drop down). • Cohort 1 (Pre-/Post-Conference Required) Observation minimum is 30 minutes. • Cohort 2 (Post-Conference Required) Observation minimum is 20 minutes. • Additional Site Visit (Pre-/Post-Conference Optional)	2. Observation Focus	
Pre-Observation (if necessary) Date _____ *Completed by Educator (as needed/required)*		
3. Meeting Plan and/or Context	*Upload and provide hyperlink here, as appropriate*	
4. Pre-Conference Notes including identified competency focus for the observation		
Observation Evidence Date _____ *Completed by the Evaluator*		
5. Observation Notes and Evidence		
Post-Observation Reflection *Completed by the Educator*		
6. What worked and how do you know?		
7. What didn't work and how do you know?		
8. What have you learned (about your practice and your learners based on what evidence) and how will you apply that learning in the future?		
Post-Observation Conference Feedback Date _____ *Completed by the Evaluator*		
9. Feedback on Evidence, Standards, and Educator's Goal		
10. Evidence of Strengths	**11. Aeas for Growth and/or Next Steps**	**12. Feedback on Single-Point Competency from Goal Setting Form (if observed)** *Completed by the Evaluator*
		Insert competencies indicated on #4. Of Goal Setting form.

1. Evaluator completes step 1. Direct Reports completes steps 2-3.
2. Evaluator schedules site visit pre-conf (if necessary) and Observationt, and completes #4.
3. Direct Report completes Post Observation #5-7
4. Evaluator schedules and holds Post Conf and completes #8-11 and signature (Eval Approve w/ Date)
5. Direct Report Sign w/Date

5. TASK: Educator End of Year Form

Educator Name: Populate from Goal setting form	**Educator Location:** Populate from Goal setting form
Educator Role: Populate from Goal setting form	**Educator Goal/Observation Focus:** Populate from Goal setting form

End-of-Year Reflection and Feedback Process

Non-negotiable Process Element of the CT Guidelines (2023)

Self-Reflection

Completed by Educator: See Self-Reflection sample reflection questions (Appendix I: Sample Reflection Questions - Educator) and Professional Learning and Action Questions (Appendix I: Sample Reflection Questions - Educator)

• What impact did your new learning have on your practice/goal(s), and how do you know? • What impact did your new learning and practice have on your student learning, growth, and/ or achievement, and how do you know? • What challenges did you encounter and what are your next steps with your professional learning?	**1. Self-Reflection:**
2. Links to Evidence:	

End-of-Year Conference Date _____

Completed by Evaluator (by June 1)

Summative Feedback and Growth Criteria

Completed by Evaluator (Appendix K: Growth Criteria and Sources of Evidence-Educator)

3. Summative Feedback	
4. Development of new learning and impact on practice related to goal(s).	
5. Impact on student learning, growth, and achievement	
6. Successful Completion of the Evaluative Cycle	• Yes • No
7. Supports Required/Suggested ***Are tiered supports required above and beyond tier 1 (included in feedback above)?*** Not applicable, Tier 2 (Pls Specify), Tier 3 (Pls Specify)	If Tier 2 and/or Tier 3, please specify strategies:
8. For multi-year goals only: • What adjustments are needed to the goal(s)? • Why? • How might adjustments impact the timing of the goal(s)?	**9. Choose one (if multi-year goal)** • Educator will continue multi-year goal. • Educator will adjust multi-year goal. • Educator completed multi-year goal. • Notes:

1. Direct Report completes steps 1-2;
2. Evaluator schedules End of Year Conf and completes 3-9 and signature (Eval Approve w/ Date)
3. Direct Report Sign w/Date

Appendix O: Observation Forms – Educator

Educator Evaluation Observation	
Educator Name: Populate from Goal setting form	**Educator Location:** Populate from Goal setting form
Educator Role: Populate from Goal setting form	**Educator Goal/Observation Focus:** Populate from Goal setting form

1. Choose one (Drop down).

- Cohort 1 (Pre-/Post-Conference Required) Observation minimum is 30 minutes.
- Cohort 2 (Post-Conference Required) Observation minimum is 20 minutes.
- Additional Site Visit (Pre-/Post-Conference Optional)

Pre-Observation (if necessary) Date _____ *Completed by Educator (as needed/required)*	
2. Meeting Plan and/or Context	*Upload and provide hyperlink here, as appropriate*
3. Pre-Conference Notes including identified competency focus for the observation	
4. Observation Evidence Date _____ *Completed by the Evaluator*	
Type evidence here	
Post-Observation Reflection *Completed by the Educator*	
5. What worked and how do you know?	
6. What didn't work and how do you know?	
7. What have you learned (about your practice and your learners based on what evidence) and how will you apply that learning in the future?	
8. Post-Observation Conference Feedback Date _____ *Completed by the Evaluator*	
Feedback on Evidence, Standards, and Educator's Goal	

9. Evidence of Strengths	**10. Feedback on Single-Point Competency from Goal Setting Form (if observed)** *Completed by the Evaluator*	**11. Areas for Growth and/or Next Steps**
	Insert competencies indicated on #4. Of Goal Setting form.	

Appendix P: Tier 3 Support Plan

Name of Staff Member:	Name of Evaluator:

Names of Supporting Staff (Other Than Evaluator):	Name of WEA/WSASA Representative:

The staff member has shown a persistent lack of growth and/or reflection in the area of:

Select One

Describe the objective for the support plan below. What is the staff member's main area of improvement?

Describe the success criteria for completion of the plan.

Complete the table below to indicate actions steps, timeline, and who will be responsible. Note: Tier 3 Support Plans have a maximum duration of 30 school days.

Action Step	When will it occur?	Who is responsible?

Progress Monitoring Log: The evaluator should indicate below when they met with the staff member for progress monitoring and describe (briefly) what was discussed.

Meeting #	Date	Notes/ Feedback

What resources will the evaluator, support personnel, and WEA/WSASA representative provide?

Signatures below indicate knowledge of this plan. Staff member name (Printed) and Signature; Evaluator member name (Printed) and Signature; WEA/WSASA Representative name (Printed) and Signature; Support personnel name (Printed) and Signature and dates.

Appendix Q Part 1: Corrective Support Plan Template – Educator

Name of Staff Member:

Name of Evaluator:

Names of Supporting Staff (Other Than Evaluator):

Name of WEA Representative:

Tier 3 Support was provided on the following dates: _____Despite Tiered Supports, this Staff Member has demonstrated a lack of growth/improvement, which has led the Evaluator to assign a Corrective Support Plan.
The staff member received Tier 3 Support and has shown a persistent lack of growth and/or reflection in the area of:

Select One

Describe the objective for the Corrective Support Plan below. What is the staff member's main area of improvement?

Describe the success criteria for completion of the plan.

Complete the table below to indicate actions steps, timeline, and who will be responsible.
Note: Corrective Support Plans have a maximum duration of 30 school days.

Action Step	*When will it occur?*	*Who is responsible?*

Progress Monitoring Log: The evaluator should indicate below when they met with the staff member for progress monitoring and describe (briefly) what was discussed.

Meeting #	Date	Notes/ Feedback

What resources will the evaluator, support personnel, and WEA representative provide?

Signatures below indicate knowledge of this plan. Staff member name (Printed) and Signature; Evaluator member name (Printed) and Signature; WEA Representative name (Printed) and Signature; Support personnel name (Printed) and Signature and dates.

Appendix Q Part 2: Corrective Support Plan Sample – Educator

Name of Staff Member:

Prof. Valerie Felicity Frizzle

Name of Evaluator:

Mr. Joseph Clark

Names of Supporting Staff (Other Than Evaluator):

Mr. Neil deGrasse Tyson

Name of WEA Representative:

Dolores Huerta

Tier 3 Support was provided on the following dates: 03/01/24-3/29/24.

The staff member received Tier 3 Support and has shown a persistent lack of growth and/or reflection in the area of:

Planning

Describe the objective for the Corrective Support Plan below. What is the staff member's main area of improvement?

Prof. Frizzle flies by the seat of her pants! She must work on planning instruction that is aligned with grade-level NGSS content standards in 4th grade science.

Describe the success criteria for completion of the plan.

Prof. Frizzle will complete and submit a one-week lesson plan sequence and a one-month long-term lesson plan sequence on the topic of fossil formation and how fossils change over time. The lesson plans will align with the curriculum, and include appropriate NGSS content standards in 4th grade. Additionally, Mr. Clark will see implementation of such plans when he informally visits her classroom.

Complete the table below to indicate actions steps, timeline, and who will be responsible.

Note: Corrective Support Plans have a maximum duration of 30 school days.

Action Step	When will it occur?	Who is responsible?
Mrs. Frizzle will undergo a coaching cycle with the instructional coach, with the purpose of reviewing the Unit 4.3 science curriculum.	Monday, March 4	Mrs. Frizzle Mrs. deGrasse Tyson
During the coaching cycle, Mrs. Frizzle will read the ASCD Quick Guide on high-quality lesson planning.	Monday, March 4	Mrs. Frizzle

With her instructional coach, she will write a one-week lesson sequence, using the WPS lesson planning template.	Monday, March 4	Mrs. Frizzle Mr. deGrasse Tyson
Mrs. Frizzle and Mr. Clark will meet to see the results of her one-week sequence.	Thursday, March 7	Mrs. Frizzle Mr. Clark
Mr. Clark will informally observe Mrs. Frizzle on 3 occasions, checking for implementation and will conduct debrief sessions after each visit.	Wednesday, March 13 Wednesday, March 20 Monday, March 25	Mr. Clark
Mrs. Frizzle will create a one-month lesson planning sequence, obtaining help from her instructional coach, as needed.	Monday, March 18	Mrs. Frizzle Mr. deGrasse Tyson
Mr. Clark and Mrs. Frizzle will meet to discuss progress and determine next steps.	Monday, March 25	Mrs. Frizzle Mr. deGrasse Tyson Mrs. Dolores Huerta

Progress Monitoring Log: The evaluator should indicate below when they met with the staff member for progress monitoring and describe (briefly) what was discussed.

Meeting #	Date	Notes/ Feedback
1	March 7	● Lesson plans aligned well with Standards ● Lessons need to move in a logical sequence ● Use Mr. Bill Nye's lesson plans as a model
2	March 14	● Reduce time of mini-lesson/ direct instruction ● Students engaged in hands-on activity
3	March 19	● Review assessment practices within one-month planning cycle ● Effective integration of NGSS standards ● Improved progression of lessons
4	March 21	● Increase amount of small group instruction ● Good evidence of scaffolding of skills within the standards
5	March 25	● Students highly engaged in "fossil dig" activity

		● Success criteria met ● Will be asked to provide lesson plans for a review of practice ● Should expect additional informal classroom visits

What resources will the evaluator, support personnel, and WEA representative provide?

- Professional texts/documents: ASCD's lesson planning guide, WPS lesson planning template
- Instructional coaching: Mr. deGrasse Tyson
- Release time, if needed
- Informal observation feedback
- Applicable outside professional learning

Signatures below indicate knowledge of this plan. Staff member name (Printed) and Signature; Evaluator member name (Printed) and Signature; WEA Representative name (Printed) and Signature; Support personnel name (Printed) and Signature and dates.

Appendix R: Dispute Meeting Agenda Template – Educator

DISPUTE MEETING AGENDA / MINUTES

DATE		ATTENDEES
TIME		☐ Evaluator: ☐ Educator: ☐ PDEC Members: ☐ Neutral Party Members: ☐ Superintendent of Schools:
LOCATION		
MEETING AGENDA	• Review of Timelines • Statement of Dispute • Identification of Process • Proposed Solutions • Resolution Status • Next Steps	

DISCUSSION TOPICS	COMMENTS
Review of Timelines	• According to Windsor's Evaluation and Support Plan, the educator must notify their evaluator of a dispute within ten days of receiving written feedback. • According to Windsor's Evaluation and Support Plan, the educator and evaluator must meet within three days after an articulated dispute to try to resolve the matter. • If the educator and evaluator did not resolve the matter, the educator chooses to continue the dispute in writing to the superintendent within three workdays of the meeting. The educator has two options: (1) meet with a PDEC subcommittee to resolve the matter, or (2) meet with the superintendent of schools.
Identification of Process	☐ Evaluator-educator meeting ☐ Option 1 (above) ☐ Option 2 (above)
Statement of Dispute	
Proposed Solutions	
Resolution Status	☐ Resolved ☐ Not Resolved

Next Steps	RESPONSIBLE	DATE DUE
•		
•		
•		

Appendix S: WPS Single Point Competency Feedback

Download Template

Select Standards: CCT			
Standard # 3a: Implement instruction to engage students in rigorous and relevant learning and to promote their curiosity at large.			
Teacher's Evidence (Teacher)	Strengths (Evaluator)	Language of Standard (Fill In by the Teacher)	Opportunities for Growth (Evaluator)
• Attended three professional learning workshops on the Building Thinking Classrooms instructional model. • Focused on using "hints and extensions" as the primary instructional practice. • During PLC time, I rehearsed hints and extensions with colleagues; received feedback on my practices. • Used hints and extensions during opening thinking tasks. • Asked supervisor/evaluator for specific feedback on my use of hints and extensions.	• Engaged in professional learning related to goal • During informal observations, recorded 17 examples of hints and extensions • Observed rehearsal of hints and extensions practice during PLC time • Identified 12% growth in student problem solving capabilities during data talks presentation • Sought feedback from evaluator and supervisor about instructional practice	Lead students to construct meaning and apply new learning through the use of a variety of differentiated and evidence-based learning strategies.	• Present to colleagues to teach them the hints and extensions strategy • Begin working on another BTC strategy of your choice • Seek opportunities for BTC training within and outside the district

Appendix T: Quick Reference Leader/Educator Continuous Learning Timeline

Quick Reference Leader/Educator Continuous Learning Timeline Summary

Evaluation Orientation for Leaders by October 15th and Evaluation Orientation for Educators by September 30th

Completed prior to the start of the Continuous Learning Process

Leader Standards for 24-25

- Common Core of Leading: CT School Leadership Standards 2012
- CT Leader Evaluation and Support Rubric 2017

Educator Standards for 24-25

- CCT Rubric for Effective Teaching 2017
- CCT Rubric for Effective Service Delivery 2017

Cohort 1

Who: **Leaders**
New to leadership role (first three years)
New to LEA (first three years)

Who: **Educators**
New to profession (first four years)
New to LEA (first two years)

What: **Leaders/Educators**
A minimum of 3 observations of professional practice

For **Educators:** Observations are a minimum of 30 minutes in length and include pre- and post- meetings.

For **Educators**: One observation of professional practice may be substituted with a review of practice.

Site Visit/ Observation of professional practice, reflection and feedback.
5 days - verbal feedback
10 days - written feedback



Cohort 2

Who: **Leaders/Educators**
Leaders/Educators who have successfully completed Cohort 1 in their current LEA

What: **Leaders/Educators**
A minimum of 2 observations of professional practice

For **Educators**: Observations are a minimum of 20 minutes in length with post- meetings.

For **Educators**: One observation of professional practice may be substituted with a review of practice.

Site Visit/ Observation of professional practice, reflection and feedback

Tiered Supports to improve practice over time.
Tier 1 - Includes all certified educators
Tier 2 - More intensive support in duration, frequency and focus. Can be suggested by direct report or evaluator. Up to 15 school days to complete a Tier 2 plan.
Tier 3 - Support responds to previously discussed concerns and are assigned by an evaluator. Has a clear area of focus, duration, and criteria of success to be completed within a maximum of 30 days.

Sample Completed Goal Setting Docs
Sample Teacher Individual Primary Goal Setting Form
Sample Teacher Specialist Goal Setting Form
Sample Leader Goal Setting Form

Local and State Reporting
The Superintendent shall report:

- by the last Board of Education meeting of each school year, the status of evaluations to the Board of Education.
- by 9/15 of each year, the status of the implementation of the certified staff evaluation and support program, including frequency of evaluations, number of certified staff not evaluated, and any other CSDE requirements.

Dispute Resolution if a direct report disagrees with evaluator's assessment and feedback.

- 30 days - Entire dispute resolution process will not exceed 30 days from the date of process initiation.
- 10 days - Dispute is articulated to evaluator in writing within 10 days of the feedback presented.
- 3 days - Direct report and evaluator meet within 3 days of dispute being articulated by direct report.
- 3 days - If no resolution from the meeting between Direct Report and Evaluator, direct report may choose to continue dispute resolution process in writing to Superintendent within 3 work days indicating preference for Option 1 or Option 2 resolution process.

Goal Setting

Educators 10/15, Leaders 11/1

Beginning of the Year Goal(s) and Planning

- Self reflect
- Review evidence

Goal(s), Rationale, Alignment, and Professional Learning Plan

- Draft goal(s), rationale, alignment, professional learning plan

Goal Setting Conference

- Mutually agree on 1-, 2-, or 3-year goal(s)
- Determine individual or group goal(s)
- Mutually agree on professional learning needs and support

Mid-year Check-In

Educators 2/15, Leaders 3/1

Mid-Year Check-in: Reflection, Adjustments, and Next Steps

- Review & discuss currently collected evidence towards goal(s) and of practice
- Review professional learning, evidence, and impact on organization health, educator and student learning, growth and achievement

Mid-Year Conference

- Discuss evidence, reflection, and feedback from evaluator
- Adjust and revise as needed

End-of-Year Reflection

Educators 6/1, Leaders 6/30

End-of-Year Reflection and Feedback Process

- Self-reflection: Review & discuss professional learning, evidence of impact on organizational health, educator and student learning, growth and achievement

End-of-Year Conference/ Summative Feedback and Growth Criteria

- Evaluator provides written summative feedback and guides next steps
- Annual Summary sign-off

Sample Completed Goal Setting Documents

Sample Teacher Individual Primary Goal Setting Form

Sample Teacher Specialist Goal Setting Form

Sample Leader Goal Setting Form

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WINDSOR
PUBLIC SCHOOLS

WINDSOR BOARD OF EDUCATION
AGENDA ITEM

For Consideration by the Board of Education at the Meeting of: April 21, 2026

Prepared By: Dr. Noha Abdel-Hady **Presented By:** N. Wolliston/N. Abdel-Hady

Attachments: See electronic documents attached to the April 21, 2026 agenda

Subject: Policy Adoption, 1st Reading

BACKGROUND:

The Board of Education Policy Committee reviewed the following policies at their meeting on March 19, 2026. The committee is bringing the policies to the full Board as a 1st reading.

1. Revised P/AR 5112 Admission to the Public Schools at or Before Age Five and Form 2
2. Revised P 5141.21 Administration of Student Medications in the Schools
3. Revised P 6142.1 Curricular Exemptions and Form 1
4. New P 6161 Library Collection Development and Maintenance, Library Displays and Programs, and Library Material Review and Reconsideration
5. New P 6170 Parental Access to Instructional Material

Administrative Regulations are informational only.

RECOMMENDATION:

Move the Board of Education approve the Policy 5112 Admission to the Public Schools at or Before Age Five and Form 2, Policy 5141.21 Administration of Student Medications in the Schools, Policy 6142.1 Curricular Exemptions and Form 1, New Policy 6161 Library Collection Development and Maintenance, Library Displays and Programs, and Library Material Review and Reconsideration, and New Policy 6170 Parental Access to Instructional Material as a 1st reading, waiving the 2nd reading, and approving the policies for immediate use and distribution.

Recommended by the Superintendent: Shahad

Agenda Item # 8.C.

Rational for Revised Policy/Administrative Regulation

P/AR 5112 Admission to the Public Schools at or Before Age Five

Under current Connecticut law (Public Act 23-208), the mandatory age for kindergarten enrollment is five years old on or before September 1. While a waiver process has existed since 2024 to allow children turning five between September 2 and December 31 to seek early entry, new emergency legislation passed in March 2026 (SB 298) establishes a "hard stop" for this practice. Starting July 1, 2027, the option for any district to grant an age-based waiver will be eliminated entirely.

This change aligns Connecticut with most other states and addresses educators' concerns about the developmental readiness of four-year-olds entering kindergarten.

For the upcoming school year, the state no longer requires the waiver process. Instead, to offer early entry, a local Board of Education must officially adopt an early admission policy. We have revised this policy and the associated form to clarify our "transitional" waiver and its sunset timeframe. We have also revised the administrative regulation to reflect the accurate dates of admission.

ADMISSION TO THE PUBLIC SCHOOLS AT OR BEFORE AGE FIVE

The Windsor Public Schools shall provide education for all persons between the age of five and twenty years inclusive who have not graduated from a high school or vocational school, except as provided in Section 10-233c and d.

Parents or other persons having control of a child five years of age and/or under eighteen years of age shall cause such child to attend school regularly. ~~Children entering Kindergarten must be five years of age on or before September 1. For children who will not reach the age of five on or before the first day of September of the school year, AND turning five before December 31st of that year, the child's parent or guardian may submit a written request to the principal of the school seeking early admission using the district approved waiver form (attached). Upon receipt of such written request, the principal and an appropriate certified staff member shall assess such child to determine whether admitting the child is developmentally appropriate. For decisions relating to early admissions to the District, the decision of the principal and appropriate certified staff shall be final.~~ Under current Connecticut law (Public Act 23-208) a child must be five (5) years old on or before September 1 to be eligible for kindergarten enrollment. Emergency legislation enacted in March 2026 (SB 298) modified the previously established waiver practice. For the 2026–2027 school year only, the District shall maintain a waiver process for children who turn five (5) between September 2, 2026, and December 31, 2026.

Kindergarten Enrollment and Early Entry Waiver (2026-2027)

I. Purpose

In accordance with the Connecticut General Assembly's **March 2026 Emergency Legislation, §§26-27 and Public Act 23-208**, this policy establishes the age requirements for enrollment in kindergarten and the specific, time-bound "transitional" waiver process available to families for the 2026-2027 academic school year.

The Windsor Board of Education adopts the following procedures for the 2026-2027 school year.

II. Eligibility for "Automatic" Enrollment

To be eligible for kindergarten, a child must have reached the age of five (5) on or before September 1.

Transitional Waiver (2026-2027)

The District recognizes that the shift in the state-mandated cutoff date (from January 1 to September 1) may place a hardship on families. Therefore, for the 2026-2027 school year, the District shall provide a waiver process for children who turn five between September 2, 2026, and December 31, 2026.

Note: A waiver is not a guarantee of enrollment; it is a request for an exception based on a determination of developmental readiness. However, students transferring to the District from other Connecticut districts and have been assessed in accordance with state requirements and

subsequently granted a waiver for the 2026-2027 school year, shall be granted a waiver for the same academic year.

Waiver Application Requirements

To apply for a waiver, parents or guardians must complete the following steps:

1. Written Request: Submit a formal "Request for Kindergarten Waiver" to the Principal of the child's assigned school. This request must be submitted no later than (insert District Deadline, e.g., May 1, 2026).

2. Parental Questionnaire: Complete a developmental history and social-emotional snapshot of the child to provide context for the school's assessment.

3. Mandatory Assessment: Under state law, once a written request is received, the District shall conduct an assessment of the child. The child will be invited to a school-based screening where a certified staff member (e.g., kindergarten teacher, school psychologist, or early childhood specialist) will evaluate:
    a. Social and emotional maturity
    b. Communication and language skills
    c. Physical and cognitive development

Determination

The Principal, in consultation with the assessment team, shall issue a written decision to the family. The decision of the Principal and the certified staff regarding whether early entry is "developmentally appropriate" is final and not subject to further appeal to the Board of Education.

Sunset of "Transitional" Waiver

- Effective Dates: This policy applies to the 2026-2027 enrollment cycle.
- Expiration: The "transitional" waiver option described herein shall expire on June 30, 2027. Future enrollment cycles shall be governed by the standing Board Policy on kindergarten admissions, which may be more restrictive as the state's transition period concludes.

Opt-Out Process

Parents or persons having control of a child may withhold their child from formal education program at age five for one year and then again at age six for one year under the following "opt-out" process:

1. The parent or person having control of the child must personally appear at the registration office;

2. The registration office shall provide the parent or person with information on the educational opportunities in the school system; and

3. The parent or person having control of the child must sign an option form exempting their child from attendance at the public school.

Note: Acknowledgement of Option to Exempt Attendance of Child Five or Six Years of Age from School form attached hereto. Waiver form for early admission request attached.

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 ages five to sixteen, inclusive

10-186 Duties of local and regional boards of education re school attendance. Hearings. Appeals to State Board. Establishment of hearing board

10-233a - 10-233f Inclusive; re: suspend, expel, removal of pupils

10-233c Suspension of pupils

10-233d Expulsion of pupils

State Board of Education Regulations

10-76a-1 General definitions (c) (d) (q) (t)

Public Act 23-208, "An Act Making Certain Revisions to the Education Statutes."

2026 Emergency Legislation (SB 298), §§ 26 &27 – Kindergarten Waivers

Policy approved: September 18, 2007
Policy revised: December 20, 2022
Policy revised: January 17, 2024
Policy revised: June 17, 2025
Policy revised:_____

Windsor Public Schools
Windsor, CT

Admission to the Public Schools At or Before Age of Five

1. Parents or other persons having control of a child five years of age by ~~December 31~~ September 1 and under sixteen years of age shall cause such child to attend school regularly.

2. Parents or persons having control of a child may withhold their child from a formal education program at age five for one year and then again at age six for one year under the following 'opt-out" process.

a. The parent or person having control of the child must personally appear at the registration office;

b. The registration office shall provide the parent or person with information on the educational opportunities in the school system; and

c. The parent or person having control of the child must sign an option form exempting their child from attendance at the public school.

NOTE: Acknowledgment of Option to Exempt Attendance of Child Five or Six Years of Age from School form attached hereto.

Regulation approved: November 17, 1998
Regulation revised: June 17, 2025
Regulation revised:_____

Dr. Noha Abdel-Hady
Acting Superintendent of Schools

Windsor Public Schools
Windsor, CT

Board of Education
601 Matianuck Avenue - Windsor, CT 06095
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WAIVER FORM FOR CHILDREN TURNING FIVE BETWEEN SEPTEMBER 2ND AND DECEMBER 31ST

~~The Connecticut Legislature recently changed the birthdate cutoff to start Kindergarten from turning 5 on or before January 1 to turning 5 on or before September 1 in the year a child starts Kindergarten. This change goes into effect starting with the 2024-2025 school year.~~

Under current Connecticut law (Public Act 23-208) a child must be five (5) years old on or before September 1 to be eligible for kindergarten enrollment. A child who does not meet the age cutoff may still be admitted to Kindergarten pursuant to Public Act No. 23-208 upon (1) a written request from the parent or guardian and (2) an assessment completed by the school that determines admitting the child to kindergarten would be developmentally appropriate.

However, emergency legislation enacted in March 2026 (SB 298) modified the previously established waiver practice. For the 2026–2027 school year only, the District shall maintain a waiver process for children who turn five (5) between September 2, 2026, and December 31, 2026.

Completing this form will serve as your official written request to the Windsor Public Schools Administration to consider your child for entry to Kindergarten in Fall 202~~4~~6.

Please complete this form to the best of your knowledge.

Parent completing the form: First Name:_____

Parent completing the form: Last Name:_____

Parent completing the form: Email address:_____

Parent completing the form: Mailing Address:_____

Parent completing the form: Best phone number to reach you:_____

Parent completing the form: Relationship to Student

Parent
Grandparent
Legal Guardian
Translator, on behalf of a parent
Other:_____

Which PreK-2 school will your child be assigned to?

~~Oliver Ellsworth~~
Poquonock School
I am not sure (We will look up your address)

Address Lookup to determine Kindergarten School

What is the Home (street) Address for your child?_____

Student Information

Student First Name:_____

Student Last Name:_____

Student Date of Birth:_____

Is the student currently attending a PreK program?

Yes, attending half day at Windsor Public Schools
Yes, attending full day at Windsor Public Schools
Yes, attends a non-WPS half day program
Yes, attends a non-WPS full day program
No, not attending any daycare or PreK program

In this section you will be providing the school system with information about your child to determine his/her readiness for Kindergarten. Please be as detailed as possible.
Does your child have any previous school or daycare experience?

_____

What are your educational goals for your child?

_____

Does your child play well with other children or does your child prefer to play independently?

_____

What kind of hobbies, sports, special interests, or unique capabilities or talents does your child have?

_____

Does your child/family receive services from community providers? If so, please list the providers.

_____

What are your child's strengths / weaknesses?

_____

How does your child communicate his/her needs?

_____

Please tell us anything else you think we should know.

_____

Rationale for Revised Policy

P5141.21 Administration of Student Medications in the Schools

This is a total rewrite of this policy.

Under Connecticut General Statutes Section 10-212a, qualified employees of boards of education are permitted (under certain circumstances) to administer epinephrine or glucagon to students. Public Act 25-143 revises the statutory language to authorize boards to use a wider range of medical equipment (e.g., nasal spray) instead of limiting boards to injection-based delivery. We have revised the policy to reflect the updated language in the statute regarding medication delivery mechanisms.

In accordance with the provisions of Connecticut General Statutes Section 10-212a(a)(2) and Section 10-212a-2 of the Regulations of Connecticut State Agencies, any proposed revisions to the administration of medications policy must be made with the advice and approval of the school medical advisor, school nurse supervisor, or other qualified licensed physician.

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 a local or regional board of education 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 of education 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 a local or regional board of education 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-and-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 local or regional board of education 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.

Paraprofessional means a health care aide or assistant or an instructional aide or assistant employed by the local or regional board of education who meets the requirements of such board of employment as a health care aide or assistant or instructional aide or assistant.

Physical therapist means a physical therapist employed full time by the local or regional board of education 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/Dean of Students 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 local or regional board of education 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 Section D, 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 Section D, 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 child 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 child 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 child 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 child 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 child 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 child 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 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, except as provided in Section D below, 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 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 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 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 child 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 his/her 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 Windsor Board of Education (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.

(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 child is capable of conducting self-testing on school grounds.

(3) 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 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 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 send an email to all staff indicating 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 additional trained 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 Section E of this policy.

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.

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), paraeducator(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.

(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-and-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 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-and-after school programs and school readiness programs, in the child'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, so long as it 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-and-after school programs and school readiness programs, in the child'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 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 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 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 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 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 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 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 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.

(4) The principal(s), teacher(s), licensed athletic trainer(s), licensed physical or occupational therapist(s), coach(es) and/or paraeducator(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(7)(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 or naloxone to be used for emergency first aid in accordance with Sections D 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 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 and naloxone intended for emergency first aid in accordance with Sections D 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-and-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-and-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.

L. School Readiness Programs and Before-and-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-and-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 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-and-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-and-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-and-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

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 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)

Adopted policy: April 24, 2007

Revised policy: April 9, 2013

Revised policy: April 17, 2018

Revised policy: December 18, 2018

Revised policy: December 20, 2022

Revised policy: September 30, 2024

Revised policy: October 21, 2025

Windsor Public Schools

Windsor, CT

Noha Abdel-Hady, EdD

Acting Superintendent of Schools

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 Windsor 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.

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.

Epinephrine means an automatic prefilled cartridge injector or similar automatic injectable equipment, a nasal spray or any other medical equipment approved by the United States Food and Drug Administration that is used to deliver epinephrine in a standard dose for emergency first aid response to allergic reactions.

Equipment used to administer glucagon means an injector or injectable equipment, nasal spray or other medical equipment approved by the United States Food and Drug Administration that is used to deliver glucagon in an appropriate dose for emergency first aid response to diabetes.

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 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.

Qualified school employee means a principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by a school district, coach or paraeducator.

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 who has been trained in the administration of medication in accordance with Section J of this policy. 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 such medication, including, but not limited to, medication administered with 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 such medication 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 such medication 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 such medication for medically-diagnosed allergies in the school setting shall not be used to prevent a student from retaining and self-

administering such medication 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 in accordance with Section J of this policy, during intramural or interscholastic athletic events, may administer inhalant medications prescribed to treat respiratory conditions and/or medication for students with medically diagnosed allergic conditions which may require prompt treatment to protect the student against serious harm or death, including medication administered with a cartridge injector, 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 paraeducator who has been trained in the administration of medication in accordance with Section J of this policy, 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 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 paraeducator, 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 paraeducator 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 paraeducator annually completes the training program established by the Connecticut State Department of Education and the Association of School Nurses of Connecticut as required by Connecticut General Statutes § 10-212a, 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 paraeducator 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 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 paraeducator;

(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 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 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 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 that shall be available in the individual school.

(b) In determining the appropriate supply of epinephrine, 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 paraeducator(s) to maintain and administer the epinephrine 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 for the purpose of emergency first aid, as described in Connecticut General Statutes § 10-212g.

(c) The selected personnel must voluntarily agree to complete the training and administer epinephrine 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.

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), paraeducator(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.

(8) 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.

(9) 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.

(10) 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.

(11) 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 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 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 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 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 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 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 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 paraeducator(s) who administer epinephrine pursuant to Sections B and 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, as described in Connecticut General Statutes § 10-212g.

(4) The principal(s), teacher(s), licensed athletic trainer(s), licensed physical or occupational therapist(s), coach(es) and/or paraeducator(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.

(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;

(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(7)(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 to be used for emergency first aid in accordance with Sections D 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 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 intended for emergency first aid in accordance with Sections D 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 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. 25-143, "An Act Implementing the Recommendations of the Office of Early Childhood, Department of Education and the Technical Education and

Career System and Concerning the Administration of Epinephrine and Glucagon."
Section 10-212
Section 10-212a
Section 10-212c
Section 10-212g
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 policy: April 24, 2007

Revised policy: April 9, 2013

Revised policy: April 17, 2018

Revised policy: December 18, 2018

Revised policy: December 20, 2022

Revised policy: September 30, 2024

Revised policy: October 21, 2025

ADOPTED: _____
REVISED: _____

Windsor Public Schools
Windsor, CT

9/5/2025

WINDSOR PUBLIC SCHOOLS
601 Matianuck Avenue
Windsor, CT 06095
TEL | 860-687-2000 FAX | 860-687-2009 WWW.WINDSORCT.ORG

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 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].*

9/5/2025

WINDSOR PUBLIC SCHOOLS
601 Matianuck Avenue
Windsor, CT 06095
TEL | 860-687-2000 FAX | 860-687-2009 WWW.WINDSORCT.ORG

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

Rational for Revised Policy

P6142.1 Curricular Exemptions

State law requires boards of education to permit curricular exemptions for five specific areas of instruction, in accordance with statutory requirements. These state laws remain unchanged. In a decision issued earlier this year by the U.S. Supreme Court, Mahmoud v. Taylor, 145 S.Ct. 2332 (2025), the Court ruled in favor of parents alleging that their free exercise rights were violated when a local school board in Maryland refused to permit excusal of their children from certain instruction. While the Court's holding is narrow in scope, school officials must now consider parent requests for excusal from instruction when they claim that instruction in certain topics burdens the religious upbringing of their children. We have revised this policy to clarify that school district administration will consider requests for excusal that fall outside the five mandatory areas of exemption in accordance with applicable law.

CURRICULAR EXEMPTIONS

[*NOTE: Boards of education are required, by statute, to provide HIV/AIDS instruction and implement the sexual abuse and assault awareness and prevention program described in this policy. Boards of education may, but are not required to, provide family life education and firearms safety programs. For instruction in any of these areas, as well as dissection, state law provides that parents and guardians may submit a written request for a curricular exemption, which must be granted in accordance with the terms described below.*]

Mandatory Curricular Exemptions:

Upon the written request of a parent or guardian received by the school district prior to planned instruction in the areas set forth below, the Windsor Board of Education (the "Board") shall permit curricular exemptions for instruction in the following areas:

1. Dissection;
2. Family life education;
3. HIV/AIDS;
4. Sexual abuse and assault awareness and prevention program; or
5. ~~Firearms~~Firearm safety programs.

Definitions:

"Dissection ~~Instruction~~instruction" is defined as instruction in which a student must participate in, or observe, the dissection of any animal.

"Family ~~Life Education Instruction~~life education instruction" is defined as instruction pertaining to family planning, human sexuality, parenting, nutrition and the emotional, physical, psychological, hygienic, economic and social aspects of family life.

"HIV/AIDS ~~Instruction~~instruction" is defined as ongoing and systematic instruction on Acquired Immune Deficiency Syndrome (AIDS) offered by the district pursuant to state law.

"Sexual abuse and assault awareness and prevention program" is defined as the state-wide program identified or developed by the Department of Children and Families, in collaboration with the Department of Education and Connecticut Sexual Assault Crisis Services, Inc. (or a similar entity) that includes age-appropriate educational materials designed for children in grades kindergarten to twelve, inclusive, regarding child sexual abuse and assault awareness and prevention that may include, but not be limited to, (A) the skills to recognize (i) child sexual abuse and assault, (ii) boundary violations and unwanted forms of touching and contact, and (iii) ways offenders groom or desensitize victims, and (B) strategies to (i) promote disclosure, (ii) reduce self-blame, and (iii) mobilize bystanders.

Written Request for Mandatory Exemption:

Parents who wish to exercise such exemptions must notify the ~~school district~~building principal in writing in advance of the instruction to be provided.

~~Permissive~~Other Curricular Exemptions:

~~Except for the mandatory curricular exemptions noted above, or otherwise required by law, the Board does not require teachers to exempt students from any other aspect of the curriculum.~~
The Board does not require teachers to exempt students from any aspect of the curriculum except as the law may require. Parents who wish to request a curricular exemption other than those noted above must notify the building principal in writing in advance of the instruction to be provided. The school district administration will consider whether to permit a requested exemption in accordance with applicable law.

Alternative Assignments:

1. Any student excused from participating in, or observing, the dissection of any animal as part of classroom instruction shall be required to complete an alternate assignment to be determined by the teacher.

2. Any student excused from participating in the sexual abuse and assault awareness and prevention program or a firearm safety program shall be provided, during the period of time in which the student would otherwise be participating in such program, an opportunity for other study or academic work as determined by the teacher.

3. Any student excused from any other aspect of the curriculum may be required by the teacher to complete an alternative assignment as determined by the teacher.

Legal References:

Conn. Gen. Stat. § 10-16c~~.~~
Conn. Gen. Stat. § 10-16e~~.~~
Conn. Gen. Stat. § 10-18c~~.~~
Conn. Gen. Stat. § 10-18d~~.~~
Conn. Gen. Stat. § 10-19(b)~~.~~
Conn. Gen. Stat. § 17a-101q~~.~~

Mahmoud v. Taylor, 145 S. Ct. 2332 (2025)

Policy Adopted: June 17, 2014
Policy Revised: December 20, 2022
Policy Revised: _____

Windsor Public Schools
Windsor, CT

WINDSOR BOARD OF EDUCATION
Curricular Exemption Request Form

I request that my child be exempted from instruction in the following areas:

Check all that apply:

1. Dissection ___
2. Family life education ___
3. HIV/AIDS ___
4. Sexual abuse and assault awareness and prevention program ___
5. Firearm safety program ___

I recognize that teachers may require my child to complete alternative assignments in lieu of the curricular instruction planned in the area of exemption.

This form must be completed annually and returned to the school principal by _____.
Date

_____
Name of Student (Please Print)

_____ _____
Parent's/Guardian's Signature Date

Or

_____ _____
Student's Signature (if 18 years of age) Date

Rational for New Policy

P6161 Library Collection Development and Maintenance, Library Displays and Programs, and Library Material Review and Reconsideration

Section 321 of Public Act 25-168 requires boards of education to adopt three policies related to school libraries: (1) a library collection development and maintenance policy; (2) a library display and program policy; and (3) a library material review and reconsideration policy governing school library materials, displays, and programming. These policies must be created in consultation with the superintendent of schools, the director of curriculum, and a school librarian and reviewed and updated, as necessary, every five years. The policies must include a number of provisions outlined in the statute and ensure, among other things, that all library materials are evaluated and made accessible in accordance with state non-discrimination laws. We have drafted one comprehensive model policy that encompasses the new statutory requirements in all three areas.

POLICY REGARDING LIBRARY COLLECTION DEVELOPMENT AND MAINTENANCE, LIBRARY DISPLAYS AND PROGRAMS, AND LIBRARY MATERIAL REVIEW AND RECONSIDERATION

The Windsor Board of Education (the "Board"), having consulted with the Superintendent of Schools for the Windsor Public Schools (the "District"), the District's director of curriculum or a person in an equivalent position, and a librarian employed by the Board, adopts this Policy Regarding Library Collection Development and Maintenance, Library Displays and Programs, and Library Material Review and Reconsideration in accordance with Connecticut law.

It is the policy of the Board to ensure that all District library materials maintained by the District are evaluated and made accessible in accordance with the protections against discrimination set forth in Connecticut law, including, but not limited to, discrimination based on race, color, sex, gender identity, religion, national origin, sexual orientation, or disability.

Any school library media specialist or school library staff member who, in good faith, implements this policy shall be immune from any liability, civil or criminal, that might otherwise be incurred or imposed and shall have the same immunity with respect to any judicial proceeding that results from such implementation.

The Board shall review this policy, and update it as necessary, every five years.

I. Definitions

For the purposes of this policy:

- "***Individual with a vested interest***" means any school staff member employed by the Board, the parent or guardian of a student currently enrolled in a school operated by the Board at the time a request for reconsideration is filed, and any student currently enrolled in a school operated by the Board at the time a request for reconsideration is filed.

- "***Library and other educational material***" means any material belonging to, on loan to or otherwise in the custody of a District school library media center, including, but not limited to, nonfiction and fiction books, magazines, reference books, supplementary titles, multimedia and digital material, software and other material not required as part of classroom instruction.

- "***Remove***" means deliberately taking library material out of a library's collection. The term "***remove***" does not include the process of clearing such collection of any materials that are no longer useful.

- "***School library staff member***" means a school library media specialist, school librarian, any certificated or noncertificated staff member whose assignment is in

the school library, or any individual carrying out or assisting with the functions of a school library media specialist or school librarian.

II. Library Collection Development and Maintenance

The Board recognizes that library and other educational material should be provided for the interest, information, and enlightenment of all students and should represent a wide range of varied and diverging viewpoints in the collection as a whole.

The Board requires that students have access to age-appropriate and grade-level-appropriate material and shall provide access to library and other educational material that is relevant to the research, independent reading interests, and educational needs of students based on a student's age, development, or grade level. The Board also recognizes the importance of the school library media center as a place for voluntary inquiry, the dissemination of information and ideas, and the promotion of free expression and free access to ideas by students.

The Board acknowledges that a school library media specialist is professionally trained to curate and develop a collection that provides students with access to the widest array of age-appropriate and grade-level-appropriate library and other educational material.

The Board directs the Superintendent to establish a procedure by which a certified school library media specialist will continually review library and other educational material within a school library media center using professionally accepted standards, which shall include, but need not be limited to, the material's relevance, the physical condition of the material, the availability of duplicates or copies of the material, the availability of more recent age-appropriate or grade-level-appropriate material, and continued demand for the material (the "Library Review Procedure"). The Library Review Procedure is attached hereto as Appendix A.

III. Library Displays and Programs

The Board recognizes that displays should be provided for the interest, information and enlightenment of all students; represent a wide range of varied and diverging viewpoints; require student access to age-appropriate and grade-level-appropriate content; and provide access to content that is relevant to the research, independent interests, and educational needs of students.

The Board further recognizes the importance of library displays and student programs as resources for voluntary inquiry and the dissemination of information and ideas and to promote free expression and free access to ideas by students.

The Board acknowledges that a school library media specialist is professionally trained to curate and develop displays and programs that provide students with access to the widest array of age-appropriate and grade-level-appropriate library and other educational material.

IV. Library Material Review and Reconsideration

The purpose of this policy section regarding library material review and reconsideration is to establish a process for individuals with a vested interest to challenge any District library and other educational material, display, or student program, as well as a process for the District to respond to any such challenges and related parameters.

A. Standards for Reviewing Challenges to Library and Other Educational Material, Display, or Student Program

1. All library materials shall be evaluated and made accessible in accordance with the protections against discrimination set forth in Connecticut law, including, but not limited to, discrimination based on race, color, sex, gender identity, religion, national origin, sexual orientation, or disability.

2. Library and other educational material, displays, and student programs shall only be excluded for legitimate pedagogical purposes or for professionally accepted standards of collection maintenance practices, as adopted in this policy and/or any accompanying procedure for the continual review of library and educational material within a school library.

3. No library and other educational material, display, or program shall be removed from library media centers, or programs be cancelled, because of the origin, background or viewpoints expressed in such material, display, or program, or because of the origin, background, or viewpoints of the creator of such material, display, or program.

4. The removal, exclusion, or censoring of any book on the sole basis that a person with a vested interest finds such book offensive is prohibited.

5. Any process for an individual with a vested interest to challenge any library and other educational material, display, or student program shall neither favor nor disfavor any group based on protected characteristics.

B. Process for Challenging Library and Other Educational Material, Display, or Student Program

The Board establishes the following process for individuals with a vested interest to challenge any library and other educational material, display, or student program, as well as a process for the District to respond to any such challenges:

1. An individual with a vested interest may submit a Request for Reconsideration of Library Material Form (the "Request Form") to the principal of the school in which the library and other educational material, display, or student program is being challenged to initiate a review of such material. The Request Form is attached hereto as Appendix B.

   Using the Request Form, an individual shall specify which portion or portions of such material the individual objects to and provide an explanation of the reasons for such objection. The individual submitting the Request Form must include the individual's full

legal name, address, and telephone number. If the individual who has submitted a Request Form is a parent or guardian, consideration of requests to reconsider and remove material, displays, or student programs shall be limited to the parents and guardians of students and eligible students currently enrolled in the school or District.

2. Upon receipt, the principal or the principal's designee shall promptly forward the Request Form to the Superintendent or Superintendent's designee.

3. The administration may consolidate any requests for review and reconsideration of the same challenged library and other educational material.

4. For each challenged library and other educational material, the Superintendent, or the Superintendent's designee, shall appoint a Review Committee consisting of:
    a. the Superintendent, or the Superintendent's designee;
    b. the principal of the school in which the library and other educational material is being challenged, or the principal's designee;
    c. the director of curriculum, or a person in an equivalent position, employed by the Board;
    d. a representative from the Board;
    e. at least one grade-level-appropriate teacher familiar with the library material, provided the teacher selected is not the individual who submitted the Request Form;
    f. a parent or guardian of a student age thirteen years or younger enrolled in the District, provided the parent or guardian selected is not the individual who submitted the Request Form;
    g. a parent or guardian of a student age fourteen years or older enrolled in the District, provided the parent or guardian selected is not the individual who submitted the Request Form; and
    h. a certified school librarian employed by the Board or employed by another board of education in the state.

    In cases where the request is submitted by a student enrolled in grades nine through twelve, and when appropriate and at the discretion of the Superintendent, a student enrolled in grades nine through twelve may serve on the Review Committee, provided the student selected is not the individual who submitted the Request for Reconsideration and the Superintendent consults with the principal of the school involved in such reconsideration request prior to making the determination whether to include the student on the Review Committee.

5. Any library and other educational material being challenged shall remain available in the school library media center according to such material's catalog record and be available for a student to reserve, check out, or access until a final decision is made by the Review Committee.

6. The Review Committee must evaluate the Request Form; read the challenged material in its entirety; evaluate the challenged material against this policy; and make a written

decision on whether or not to remove the challenged material not later than sixty (60) school days from the date the Request Form was received by the principal or the principal's designee. The Review Committee shall provide a copy of the committee's decision and report to the individual with a vested interest who submitted the Request Form and to the principal of the school.

7. The individual with a vested interest who submitted the Request Form may appeal the Review Committee's decision to the Board. The Board shall determine whether the reconsideration process was followed and publish its decision on the Internet web site of the District.

8. Once a decision has been made by the Review Committee on any library and other educational material, such material cannot be subject to a new request for review and reconsideration for a period of three (3) years.

Legal References:

Conn. Gen. Stat. § 10-15c

Public Act No. 25-168, "An Act Concerning the State Budget for the Biennium Ending June 30, 2027, and Making Appropriations Therefor, and Provisions Related to Revenue and Other Items Implementing the State Budget."

ADOPTED:_____

Windsor Public Schools
Windsor, CT

APPENDIX A

LIBRARY REVIEW PROCEDURE

LIBRARY REVIEW PROCEDURE

The Board directs the Superintendent to establish a procedure by which a certified school library media specialist will continually review library and other educational material within a school library media center using professionally accepted standards, which shall include, but need not be limited to, the material's relevance, the physical condition of the material, the availability of duplicates or copies of the material, the availability of more recent age-appropriate or grade-level-appropriate material, and continued demand for the material.

This Library Review Procedure is grounded in professionally accepted library collection maintenance practices, including guidance from the American Library Association regarding ongoing collection review and weeding to ensure materials remain accurate, current, relevant, and accessible.

Accordingly, the District establishes the following Library Review Procedure.

1. Purpose

The purpose of this Library Review Procedure is to ensure that library and other educational material maintained within District school library media centers is reviewed on an ongoing basis and maintained as a current, relevant, age-appropriate, and grade-level-appropriate collection that supports student learning and instructional needs.

2. Guiding Documents and Instructional Alignment

In conducting ongoing review and collection maintenance, the certified school library media specialist shall ensure that library and other educational material supports District instructional priorities and guiding documents, including:

1. **The Windsor Instructional Core Wheel**
   The Windsor Instructional Core Wheel, which defines the District's mission, the Profile of the Windsor Graduate, and a shared vision for high-quality instruction. Central to this framework is a commitment to Tier 1 instruction, characterized by explicit teaching, differentiation, and the integration of students' prior knowledge, which serves as the primary benchmark for ensuring all students are prepared for post-secondary success.

2. **The District-Wide "4Cs" Initiative**
   The District-Wide "4Cs" Initiative, which defines the core values of being Courageous, Caring, Creative, and Committed. These foundational character traits are designed to ensure students thrive beyond the classroom and are intentionally aligned with both the CASEL Social-Emotional Learning (SEL) competencies and the Windsor Profile of a Graduate. This alignment reinforces the development of five key student attributes: being

a Self-Aware Critical Thinker, a Problem Solver, an Effective Communicator, and Socially Responsible.

3. Responsibility

1. **Certified School Library Media Specialist**
   Each school library media center collection shall be reviewed and maintained by a certified school library media specialist, who shall apply professionally accepted standards and practices of collection maintenance, including ongoing evaluation and deselection(weeding) as appropriate.

2. **Administrative Support**
   The building principal, or the principal's designee, shall support implementation of this procedure, including facilitating collaboration with staff and access to information needed to support review.

3. **District Oversight**
   The Superintendent, or the Superintendent's designee, shall provide oversight to support consistent implementation of this procedure across the District.

4. Continuous Review and Annual Inventory

1. **Continuous Review Requirement**
   The certified school library media specialist shall continually review library and other educational material as part of regular collection maintenance practices to ensure materials remain current, useful, and aligned to student needs.

2. **Annual Inventory**
   At least annually, the certified school library media specialist shall conduct an inventory of the collection and equipment. Inventory results may be used to identify materials for repair, replacement, or removal, and to support systematic collection review.

5. Review Criteria

In determining whether materials should be retained, repaired, replaced, or removed as part of routine collection maintenance, the certified school library media specialist shall apply professionally accepted standards and shall consider the following criteria, including, but not limited to:

1. **Relevance**
   Whether the material remains relevant to student learning, student interests, and instructional needs, including age-appropriate and grade-level-appropriate use.

2. **Physical Condition**
   Whether the material is in satisfactory physical condition for continued use, including whether it is damaged, incomplete, or otherwise unsuitable for circulation or access.

3. **Availability of Duplicates or Copies**
   Whether the material is an unnecessary duplicate, including whether additional copies remain needed to meet student demand or instructional use.

4. **Availability of More Recent Materials**
   Whether the material has been superseded by a more recent edition, more accurate resource, or more age-appropriate or grade-level-appropriate resource.

5. **Continued Demand**
   Whether the material continues to demonstrate demand, including through circulation data, instructional use, or other evidence of ongoing student need or interest.

6. **Accuracy and Currency**
   Whether the material reflects current, reliable, and accurate information, particularly in areas where information changes over time.

7. **Format and Accessibility**
   Whether the material remains accessible and usable by students, including considerations related to format, readability, and availability of alternative formats when appropriate.

8. **Alignment to District Instructional Priorities**
   Whether the material supports the District's Instructional Core Wheel and the District's 4C's Initiative.

6. Determinations and Actions

Based on application of the criteria set forth above, the certified school library media specialist may take one or more of the following actions:

1. **Retain**
   The material may be retained in the collection.

2. **Repair**
   The material may be repaired, when feasible and appropriate, as part of routine collection maintenance.

3. **Replace**
   The material may be replaced with a newer, more appropriate, or more durable version or edition, as available and appropriate.

4. **Remove (Deselection/Weeding)**
   The material may be removed from the collection as part of routine collection maintenance when it no longer serves the needs of students or the instructional program, including due to accuracy, currency, relevance, physical condition, unnecessary duplication, or lack of demand over time.

7. Documentation

1. **Recordkeeping**
   The certified school library media specialist shall maintain documentation of materials removed from the collection, including a general description of the rationale for removal

consistent with the criteria set forth in this procedure.

2. **Collection Planning**
   Information from collection review may be used to inform acquisition planning and support continuous improvement of the library program.

8. Disposition of Removed Materials

Materials removed from the collection through routine collection maintenance shall be handled in accordance with District procedures and practices and may include disposal, recycling, donation, or other lawful methods determined appropriate by the District, as outlined in Windsor Public Schools Board Policy P3260.

9. Relationship to Reconsideration Process

This Library Review Procedure addresses routine review and collection maintenance conducted by library professionals using professionally accepted standards. Any challenge to library and other educational material, displays, or student programs submitted by an individual with a vested interest shall be addressed through the reconsideration process established in Board policy and Appendix B, as applicable.

APPENDIX B

REQUEST FOR RECONSIDERATION OF LIBRARY MATERIAL

This form may be used by an individual with a vested interest to challenge any library or other educational material, display, or student program in accordance with the Board's Library Collection Development and Maintenance, Library Displays and Programs, and Library Material Review and Reconsideration policy. The form should be completed in its entirety and submitted to the principal of the school in which the library and other educational material is being challenged to initiate a review of such material.

Full Legal Name of Person Submitting Request:

_____

Please note that the process for challenging any library and other educational material, display, or student program is available only to the following "individuals with a vested interest" as defined in the Board's Library Collection Development and Maintenance, Library Displays and Programs, and Library Material Review and Reconsideration policy:

- ***any school staff member employed by the Board ("Staff Member"),***
- ***the parent or guardian of a student currently enrolled in a school operated by the Board at the time a request for reconsideration is filed ("Parent/Guardian"), and***
- ***any student currently enrolled in a school operated by the Board at the time a request for reconsideration is filed ("Student").***

Referring to the definitions immediately above, please indicate your role by checking any or all of the following that apply. I am a:

_____ Staff Member _____ Parent/Guardian _____ Student

Address:

_____

Telephone Number:

_____

Email Address:

_____

I have read the Board's Library Collection Development and Maintenance, Library Displays and Programs, and Library Material Review and Reconsideration Policy: (check one)

_____ Yes
_____ No

I am requesting that the following library material(s), display(s), and/or student program(s) be reviewed:

_____

Check one:

_____ I have read, viewed, listened to, and/or examined the material in its entirety
_____ I have read, viewed, listened to, and/or examined a portion of the material

I am requesting that this material be reviewed because I object to: (check one)

_____ The entire material
_____ A specific portion or portions of the material (identify portion(s) below)
_____
_____
_____

I provide the following explanation of the reasons for my objection(s) stated above:

_____
_____
_____
_____
_____
_____
_____
_____
_____

Signature: _____ Date: _____

Received by:

Name: _____
School: _____
Date: _____

Rational for New Policy

P6170 Parental Access to Instructional Material

Under current law, boards of education must establish a district curriculum committee responsible for recommending, developing, reviewing, and approving all curriculum for the district. Boards of education are also required to make approved curriculum and associated materials available to parents and guardians. Pursuant to Public Act 25-174, beginning with the 2026-2027 school year, and each school year thereafter, boards of education are required to post the objectives and scope and sequence of all approved curriculum on their website.

PARENTAL ACCESS TO INSTRUCTIONAL MATERIAL

In accordance with federal law, state law, and Windsor Board of Education (the "Board") policy, parents or guardians shall be permitted access to instructional material used as part of the educational curriculum for any student and all curriculum approved by the Board's curriculum committee established pursuant to section 10-220 of the Connecticut General Statutes and all associated curriculum materials ("Curriculum"). Curriculum does not include academic tests or academic assessments.

Beginning with the 2026-2027 school year, and each school year thereafter, the Board shall post the objectives and scope and sequence of all approved curriculum on its website.

"Instructional Material" means any instructional content that is provided to a student, regardless of its format, including printed or representational materials, audio-visual materials, and materials in electronic or digital formats (such as materials accessible through the Internet). The term does not include academic tests or academic assessments.

Upon request, the district shall permit parents or guardians to inspect any Instructional Material and Curriculum. The district shall grant reasonable access to Instructional Material and Curriculum within a reasonable period of time after a request is received from a parent or guardian.

All available Instructional Material and Curriculum is also posted on the Windsor Public Schools website, including objectives and scope and sequence of all approved curriculum.

Legal Reference:

Federal Law:

Elementary and Secondary Education Act of 1965, 20 U.S.C. § 1232h, as amended by the Every Student Succeeds Act, Pub. L. 114-95

State Law:

Conn. Gen. Stat. § 10-220, Duties of Boards of Education

Public Act 25-174, "An Act Authorizing and Adjusting Bonds of the State and Concerning Grant Programs, State Grant Commitments for School Building Projects, Revisions to the School Building Projects Statutes and Various Provisions Revising and Implementing the Budget for the Biennium Ending June 30, 2027."

ADOPTED: _____

Windsor Public Schools
Windsor, CT

WINDSOR BOARD OF EDUCATION

AGENDA ITEM

For Consideration by the Board of Education at the Meeting of: April 21, 2026

PREPARED BY: Danielle Batchelder **PRESENTED BY:** Danielle Batchelder, Chief of Operations

ATTACHMENTS: None

SUBJECT: Recommended Non-Renewal of Teachers

BACKGROUND: In accordance with Section 10-151(c) of the Connecticut General Statutes and the advice of legal counsel, the Superintendent of Schools will recommend the non-renewal of non-tenured teachers at the regular April 21, 2026 meeting of the Board of Education.

STATUS: The teaching contracts for the teacher(s) will be provided prior to the Board meeting.

RECOMMENDATION:
"Move that the contract of employment of 'employees listed in the Superintendent's Human Resources Report – Addendum' not be renewed for the following year upon its expiration at the end of the 2025-2026 school year and that the Superintendent of Schools is directed to advise such persons in writing of this action."

Reviewed by: _____ **Recommended by the Superintendent:** _____

Agenda Item # 8.d.