Policies for January 30, 2023 Policy Meeting

09.224	Emergency Medical Treatment
03.1233	Child Rearing/Adoption Leave (Certified)
03.2233	Child Rearing/Adoption Leave Classified
08.132	Gifted and Talented Students and Primary Talent Pool Students

New text without highlights is KSBA Sample language to implement KRS 217.186(4), as amended in 2015.

New text highlighted in Blue is JCPS recommended language.

STUDENTS 09.224

Emergency Medical Treatment

FIRST-AID ROOM

A first-aid area with appropriate equipment, supplies and provisions for <u>a the</u> child to recline shall be designated in each school. At least two (2) adult employees in each school, at least one (1) of whom shall be present at the school at all times during school hours, shall have completed and been certified in a standard first aid course that includes <u>Cardiopulmonary Resuscitation (CPR)</u> for infants and children.

In accordance with state law, every school shall have personnel trained each school year to administer emergency medication to students for seizures, diabetes, life threatening allergic reactions and asthma as prescribed by the student's health care practitioner and in accordance with or the District school health protocols School Health.

STOCK EPINEPHRINE

As <u>encouraged suggested</u> in <u>KRS 158.836</u>, each school shall stock epinephrine, so that trained staff may administer epinephrine to any student believed to be having a life-threatening allergic or anaphylactic reaction.¹

When <u>a student enrolled students</u>, for whom documentation under <u>KRS 158.838</u>, including <u>a seizure action plans</u>, has been provided to the school, <u>is are</u> present during school hours or <u>is a ast participant participants</u> in <u>a school-related activityactivities</u>, a school employee <u>shall be present</u> who has been appropriately trained to administer or assist with the self-administration of glucagon, insulin, seizure rescue <u>medication medications</u>, or medication prescribed to treat seizure disorder symptoms. <u>The medication shall be approved by the FDA and administered pursuant to a student's seizure action plan, <u>shall be present</u>.</u>

STOCK ALBUTEROL

Each school may also stock albuterol, so that trained staff may administer albuterol to any student having an asthma exacerbation or respiratory symptoms associated with a life-threatening allergic or anaphylactic reaction.

OPIOID ANTAGONIST

The District schools may maintain an opioid antagonist in schools for administration to an individual who may experience a life-threatening, opioid overdose. An opioid antagonist for such instances shall be administered following the protocols developed by the Kentucky Department of Public Health. These protocols shall be stored along with the opioid antagonist for ease of reference.

The District Health Services Department shall be responsible for coordinating the purchase, distribution, maintenance, and replacement of an opioid antagonist in all schools, and the training of school personnel in its use.

STUDENTS 09.224

Emergency Medical Treatment

EMERGENCY CARE PROCEDURES

<u>The District Schools</u> shall have emergency care procedures <u>for implementation in schools that conform to comporting with Kentucky administrative</u> regulation² and may utilize the Kentucky Department of Education's Health Services Reference Guide (HSRG) as a resource.

REQUIRED INFORMATION NEEDED

A number at which <u>a parent/guardian may parents can</u> be reached and the name of the <u>student's health care practitioner family physician</u> shall be maintained at each school for <u>every student all its students</u>.² A parent/guardian shall Parents will be notified in the event of an accident.

REFERENCES:

¹KRS 158.836

²702 KAR 001:160

KRS 156.160; KRS 156.502; KRS 158.838

Kentucky Department of Education Health Services Reference Guide (HSRG)

RELATED POLICIES:

09.21; 09.22; 09.2241

Adopted/Amended: 8/4/2020 Order #: 2020-106 PERSONNEL 03.1233

- CERTIFIED PERSONNEL -

Child Rearing/Adoption Leave

PAID SICK LEAVE

Childbirth and recovery therefrom, which prevents the employee from performing assigned duties, shall entitle the employee to sick leave benefits as provided in Board Policy 03.1232. An employee may use up to thirty (30) days of sick leave immediately following the birth or adoption of a child or children.

An illness of the newborn shall entitle the employee to sick leave benefits as provided in Board Policy 03.1232.

Additional sick leave days may be used when the need is verified by a physician's statement.

UNPAID CHILD REARING/ADOPTION LEAVE

An employee of the District may be granted upon written request an unpaid leave of absence for the purpose of fulfilling adoption requirements or for rearing the employee's pre-school child<u>or children(ren)</u>.

A single child rearing/adoption leave may be granted for a period of no less than thirty (30) days and no more than two (2) consecutive school years or a major portion thereof. A part-time Part-time, initial probationary, temporary, seasonal, or substitute employee or student worker is employees and student workers are not eligible for child rearing/adoption leave, except as provided by federal law and the Kentucky Pregnant Workers Act (SB 18 2019 RS) as codified in KRS 344.030 to 344.110.

During the 2020-2021 school year only, employees of the District may request unpaid leave pursuant to this benefit to care for children under the age of fourteen (14) for whom the employee has no daily child care due to school closures and/or day care closures relating to COVID-19 concerns.

<u>An employee Employees</u> on child rearing/adoption leave shall notify the Superintendent/designee in writing of their intent to return to the school system on or before the date prescribed in Policy 03.123. <u>An employee Employees</u> who <u>fails fail</u> to notify the Superintendent/designee of their return by the date prescribed in Policy 03.123 cannot be guaranteed employment for the following school year.

<u>An employee Employees</u> taking a child rearing/adoption leave <u>shall will</u> be entitled on return to a comparable position for which they are qualified. Placement in the same position or the same school cannot be guaranteed.

FAMILY WITH MEDICAL LEAVE ACT (FMLA)

In compliance with the Family and Medical Leave Act of 1993, an eligible employee is employees are entitled to up to twelve (12) workweeks of unpaid leave to care for the employee's child after birth or placement of a child with the employee for adoption or foster care. Leave to care for an employee's healthy newborn baby or minor child who is adopted or accepted for foster care must be taken within twelve (12) months of the birth or receipt of the child.

REQUEST FOR MEDICAL INFORMATION

Per <u>KRS 161.770</u>, the Board may only request medical information necessary to decide whether to grant a leave of absence; shall not request or retain unnecessary medical information; and shall not disclose any medical information received, except as permitted by state and federal law.

PERSONNEL 03.1233 (CONTINUED)

Child Rearing/Adoption Leave

REFERENCES:

KRS 161.155; KRS 161.770 KRS 344.030 to 344.110

OAG 80-151; OAG 84-43; OAG 86-66 Family and Medical Leave Act of 1993

RELATED POLICIES:

03.123; 03.1232; 03.12322

Adopted/Amended: 9/1/2020

Order #: 2020-127

PERSONNEL 03.2233

- CLASSIFIED PERSONNEL -

Child Rearing/Adoption Leave

PAID SICK LEAVE

Childbirth and recovery therefrom, which prevent the employee from performing assigned duties, shall entitle the employee to sick leave benefits as provided in Board Policy 03.2232. An employee may use up to thirty (30) days of sick leave immediately following the birth or adoption of a child or children.

An illness of the newborn shall entitle the employee to sick leave benefits as provided in Board Policy 03.2232.

Additional sick leave days may be used when the need is verified by a physician's statement.

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A single child rearing/adoption leave may be granted for a period of no less than thirty (30) days and_no more than two (2) consecutive school years or a major portion thereof. A part-time Part-time, initial probationary, temporary, seasonal, or and substitute employee or student worker is employees and student workers are not eligible for child rearing/adoption leave, except as provided by federal law and the Kentucky Pregnant Workers Act (SB 18 2019 RS) as codified in KRS 344.030 to 344.110.

An employee Employees on child rearing/adoption leave shall notify the Superintendent/designee in writing of their intent to return to the school system on or before the date prescribed in Policy 03.223. An employee Employees who fails fail to notify the Superintendent/designee of their return by the date prescribed in Policy 03.223 cannot be guaranteed employment for the following school year.

<u>An employee Employees</u> taking a child rearing/adoption leave <u>shall will</u> be entitled on return to a comparable position for which they are qualified. Placement in the same position or the same school cannot be guaranteed.

FAMILY WITH MEDICAL LEAVE ACT (FMLA)

In compliance with the Family and Medical Leave Act of 1993, an eligible employee is employees are entitled to up to twelve (12) workweeks of unpaid leave to care for the employee's child after birth or placement of a child with the employee for adoption or foster care. Leave to care for an employee's healthy newborn baby or minor child who is adopted or accepted for foster care must be taken within twelve (12) months of the birth or placement of the child.

REFERENCE:

Family & Medical Leave Act of 1993 KRS 344.030 to 344.110

PERSONNEL 03.2233 (CONTINUED)

Child Rearing/Adoption Leave

RELATED POLICIES:

03.223; 03.2232; 03.22322

Adopted/Amended: 9/1/2020

Order #: 2020-127

Gifted and Talented Students and Primary Talent Pool Students

DISTRICT PROVIDES

The Board shall provide a program of instruction with multiple service options for academically gifted and talented students in grades K-12 to meet the interests, needs, abilities and talents of students. Students shall be admitted to this program and receive services according to administrative procedures developed by the Superintendent/designee in accordance with 704 KAR 003:285.

The District shall formally identify students in grades four through twelve (4-12) for participation in the District's Gifted and Talented program. Students in the primary program (grades K-3) who possess display characteristics and behaviors that may be indicators of a high potential learner shall be selected through an informal process, and be placed in a Primary Talent Pool talent pool and receive services that allow continuous progress.

In compliance with applicable statutes and administrative regulations, the District shall provide appropriate multiple service options for students in grades four (4) through twelve (12) in an environment that addresses the abilities, interests and needs of students eligible for services in one (1) or more of the following categories: general intellectual ability; specific academic aptitude; creative or divergent thinking; psychosocial or leadership ability; and visual or performing arts ability.

The definitions specified in <u>704 KAR 003:285</u> shall be used in the operation of the District's programs for gifted and talented students <u>and students in the Primary Talent Pool</u>.

IDENTIFICATION/DIAGNOSIS AND ELIGIBILITY

In compliance with 704 KAR 003:285, the Superintendent/designee shall develop strategies to address identification and diagnosis of the strengths, gifted behaviors and talents of these students. Determination of eligibility for gifted and talented services shall be based on the student's individual needs, interests and abilities and shall be designed to address environmental and cultural factors that may contribute to the student being overlooked, such as whether the student is economically disadvantaged, underachieving, struggles with maintaining appropriate behavior, or is a member of a racial or ethnic minority, or has a disability or is an English Language Learner (ELL).

The District's plan for the identification and diagnostic screening of gifted and talented students shall:

- 1. Employ a balanced, multiple criteria approach continuous and multiple long-term assessment, and early identification of strengths, gifted behaviors, and talents;
- 2. Be based on a variety of valid and reliable measures to include both informal and formal techniques, objective-based eligibility criteria, and other data specific to each category of giftedness, consistent with standards established by Kentucky Administrative Regulation; and
- 3. Screen students for all areas of giftedness as defined by KRS 157.200.

Based on data gathered by the building level Gifted <u>Lead and Talented Coordinator</u> or gifted education teacher, <u>the gifted</u> and talented identification and placement committee shall determine those students who are eligible for gifted education <u>or Primary Talent Pool</u> services and the level and type of the services to be provided. Determination of level and type of services provided to a

(CONTINUED)

Gifted and Talented Students and Primary Talent Pool Students

IDENTIFICATION/DIAGNOSIS AND ELIGIBILITY (CONTINUED)

student shall be subject to continuous assessment. This committee shall consist of the Principal or designee, the building level <u>Gifted Lead gifted education coordinator</u> and/or the gifted education

teacher, classroom teacher(s), teacher(s) of students with disabilities, <u>ELL teacher(s)</u>, counselor(s), and consulting professional(s), as appropriate.

Prior to selection or formal identification and placement of a student, the District shall obtain parental/guardian permission before administering an individual test to the student given as a follow-up to a test routinely administered to all students and used in formal identification. If it is determined that their child is eligible for gifted education services, parents/guardians also shall be notified, at least once annually, of the services included in the Gifted and Talented Student Services Plan (GSSP) gifted and talented student services plan and shall receive a copy of the procedures to be followed should they wish to appeal the appropriateness of services.

SERVICES

Gifted and talented students shall be provided with a <u>GSSP</u> student services plan that meets requirements set out in administrative regulation.

Each school shall adjust its curriculum to meet the needs of gifted and talented students. Gifted and talented students shall be served in a manner that:

- 1. Extends learning beyond the standard curriculum;
- 2. Provides flexible curricular grouping and differentiated curriculum experiences commensurate with the student's interests, needs and abilities; and
- 3. Helps the student attain, to a high degree, the goals established by statute and the Board.

Procedures and strategies to implement this policy shall identify the following:

- A variety of appropriate options for grouping by ability, interest and/or need,
- Multiple service delivery options reflecting continuous progress through a logical sequence of learning,
- Means of obtaining parental input for use in determining appropriate services,
- A <u>GSSP gifted and talented student services plan</u> format that provides for matching a formally identified gifted student's interests, needs, and abilities to differentiated service options, and
- A plan for <u>providing the parent/guardian a progress report reporting to parents</u>, at least twice per year, regarding their child's progress in services <u>specified in through</u> the <u>student's GSSPGifted Student Services Plan (GSSP)</u>.

Neither the primary program, nor any grade level shall be served by only one (1) gifted education service option. Service delivery options may include:

- a) Various acceleration options (e.g., early exit from primary, grade skipping, content and curriculum in one (1) or more subjects from a higher grade level);
- b) Advanced placement and honors courses; o we need
- c) Collaborative teaching and consultation services;
- d) Special counseling services;

Gifted and Talented Students and Primary Talent Pool Students

SERVICES (CONTINUED)

- e) Differentiated study experiences for individuals <u>students</u> and cluster groups <u>of students</u> in the regular classroom;
- f) Distance learning;
- g) Enrichment services during the school day (not extracurricular);
- h) Independent study;
- i) Mentorships;
- j) Resource services delivered in a pull-out classroom or other appropriate instructional setting;
- k) Seminars;
- 1) Travel study options; or
- m) Special schools or self-contained classrooms, grades four (4) through twelve (12) only.

An additional service model for students identified with general intellectual ability and/or a specific academic aptitude as defined in 704 KAR 003:285, shall be the Advance Program, established and implemented by the District. Students shall be identified for the Advance Program through assessments of cognitive ability, teacher evaluation, Grade Point Average (GPA), exceptional characteristics, and standardized tests, and the criteria for acceptance into the Advance Program are separate from the requirements for identifying and diagnosing gifted and talented characteristics and behaviors.

PERSONNEL

The Superintendent shall appoint a Gifted and Talented Coordinator who shall oversee the operation of the District's Gifted and Talented program and assist schools in implementing the provisions of this policy. The Gifted and Talented Coordinator shall oversee the expenditure of funds for gifted education to ensure they are used to provide direct services to identified students.

Teachers of gifted and talented students shall be encouraged to meet requirements for certificate endorsement as established in Kentucky Administrative Regulation. Through professional development activities, all teachers shall receive training on identifying and working with gifted and talented students.

PROGRAM EVALUATION

The Gifted and Talented Coordinator shall coordinate the annual, on-going process of evaluating all aspects of the gifted education program and make recommendations for upgrading those areas found to be deficient. Data collected in the annual evaluation shall be used in the comprehensive improvement planning process, and results of the evaluation shall be reported to the Kentucky Department of Education, the SBDM council and the Board as needed and/or requested.

GRIEVANCES

<u>A student or parent/guardian Students or parents</u> who wish<u>es</u> to file a grievance or appeal concerning the following areas may do so under the process outlined in <u>District</u> administrative procedures:

1. The District's process for selecting students for talent pool services;

(CONTINUED)

Gifted and Talented Students and Primary Talent Pool Students

GRIEVANCES (CONTINUED)

- 2. The District's process for formal identification of gifted and talented students; or
- 3. The appropriateness and/or adequacy of talent pool services or services addressed in a formally identified <u>GSSP</u>student services plan.

This policy and the <u>administrative</u> procedures to implement it shall be made available for public inspection.

REFERENCES:

KRS 157.196; KRS 157.200; KRS 157.224

KRS 157.230; KRS 158.6451; KRS 161.052; KRS 161.095

016 KAR 002:110; 016 KAR 004:010

704 KAR 003:285

P. L. 114-95, (Every Student Succeeds Act of 2015)

A Framework to Provide Successful Learning Opportunities for Gifted and Talented Students, Kentucky Department of Education

RELATED POLICY:

09.126 (re requirements/exceptions for students from military families)

Adopted/Amended: 4/16/2019 Order #: 2019-52

Administrative Procedures for Review at February 7, 2023 Board Meeting

STUDENTS 09.224 AP.1

Emergency Medical Care Procedures

The emergency medical care procedures listed below are to be followed in case of serious accidents and/or sudden illnesses occurring in the schools:

EMERGENCY INFORMATION

Emergency care information for each student shall be filed in the Principal's office. This information is to include:

- 1. Student's name, address, and date of birth.
- 2. Parent/guardians' names, addresses, and home, work, and emergency phone numbers.
- 3. Name and phone number of <u>the student's family physician/health care provider</u> and permission to contact health care professionals in case of emergency.
- 4. Name and phone number of <u>an authorized</u> "emergency" contact (person other than parent/guardian) to reach, if necessary.
- 5. Unusual medical problems, if any.

MEDICAL EMERGENCY PROCEDURES

The following procedures shall be used in a medical emergency:

- 1. Administer first aid by a school employee trained in first aid and CPR in accordance with state regulation.
- 2. Contact the <u>student's child's parent/guardian</u> or other authorized person(s) listed on the school emergency card to:
 - a) Inform the student's parent/guardian or authorized person contact that the child is not able to remain at school.
 - b) Indicate the apparent symptoms; however, do not attempt to diagnose.
 - c) Advise the <u>parent/guardian or other authorized person to consider consulting with</u> <u>contact that s/he may want to contact a physician/health care provider practitioner</u> regarding the child's condition.
- 3. Take care of child until parent, health care practitioner, or ambulance arrives.
- 4. Use emergency ambulance service, if needed.
- 5. Administer medication in accordance with District policy and <u>administrative</u> procedure when ordered by the student's personal <u>physician/health</u> care <u>provider practitioneror in accordance with parental permission through a standing order for the administration of over-the counter medication.</u>
- 6. Keep the student in a first aid area if the student s/he appears to be unable to return to the classroom.
- 7. Do not allow the student to leave school with anyone other than the parent/ guardian or authorized person/designee after an accident or when ill.
- 8. After a child has an accident or becomes ill at school, arrange transportation home with the parent/guardian/designee.
- 9. Report all emergency situations to the building administrator.
- 10. Treat students with <u>communicable contagious</u> diseases, including AIDS, according to <u>applicable</u> state <u>administrative regulations</u>, protocols, and <u>guidelines</u>; <u>guidelines from the Centers for Disease Control & Prevention</u>; <u>guidelines from the American Academy of Pediatrics "Managing Infectious Diseases in Childcare and Schools" most recent edition</u>; <u>or Board reviewed administrative procedures</u>.

STUDENTS 09.224 AP.1 (CONTINUED)

Emergency Medical Care Procedures

MEDICAL EMERGENCY PROCEDURES (CONTINUED)

11. <u>Follow Employees shall follow</u> the District's Exposure Control Plan <u>set forth in Administrative Procedures 03.14 AP.1</u> when clean-up of body fluids is required.

SUPPLIES/PERSONNEL

- 1. Each school shall have an approved first-aid kit and designated first-aid area.
- 2. Each school shall maintain epinephrine in a minimum of two (2) locations in the school, including but not limited to the school office and the school cafeteria for administration to students who may have a life-threatening allergic reaction but have no written individual health plan in place.
- 3. At least two (2) adult employees in each school shall have completed and been certified in a standard first-aid course, including but not limited to, CPR.
- 4. As provided by Policy 09.224, any school that has a student enrolled with diabetes or seizure disorders, including seizure action plans, shall have on duty during the school day or during any school-related activity activities in which the student is a participant, at least one (1) school employee who is a licensed medical professional, or has been appropriately trained to administer or assist with the self-administration of glucagon, insulin or seizure rescue medication or medication prescribed to treat seizure disorder symptoms approved by the FDA and administered pursuant to a student's seizure action plan, as prescribed by the student's health care practitioner. The training shall also include recognition of the signs and symptoms of seizures and the appropriate steps to be taken to respond to these symptoms.
- 5. The parent/or-guardian of each student diagnosed with a seizure disorder shall collaborate with school personnel to implement a seizure action plan, prepared by the student's treating physician/health care provider, which shall be kept on file in the office of the school nurse or school administrator.
- 6. Any school personnel or volunteers responsible for the supervision or care of a student diagnosed with a seizure disorder shall be given notice of the seizure action plan, the identity of the school employee or employees trained in the administration of seizure medication, and how they may be contacted in the event of an emergency.

DOCUMENTATION

A complete record of any emergency care provided shall be made and filed with the student's health record. The following information shall be recorded:

- 1. Time and place accident or illness occurred.
- 2. Causative factors, if known.
- 3. Type of care provided and name(s) of person(s) who gave emergency treatment.
- 4. Condition of the student receiving emergency care.
- 5. Verification of actual contacts and attempts to contact parent/guardian or authorized person.
- 6. List of names of persons who witnessed the accident or illness and the treatment rendered, as appropriate.

RELATED POLICIES:

09.224; 09.2241

STUDENTS 09.224 AP.1 (CONTINUED)

Emergency Medical Care Procedures

RELATED PROCEDURES:

09.224 AP.21; 09.2241 AP.22; 09.2241 AP.23

Review/Revised:2/11/2020