

EXPLANATION: THE UPDATED FBI CJIS SECURITY POLICY CHANGES THE TRAINING REQUIREMENTS FROM EVERY TWENTY-FOUR (24) MONTHS TO EVERY TWELVE (12) MONTHS.
FINANCIAL IMPLICATIONS: MORE FREQUENT TRAINING

PERSONNEL

03.11 AP.2521

Criminal History Record Information

PURPOSE

The District may use Criminal History Record Information (CHRI) obtained from the Kentucky State Police (KSP) to check qualification for employment or service as provided in KRS 160.380 and related policies and for authorizing personnel who will make fitness determinations. CHRI may not be used for any other purpose.

AUTHORITY

The District has the authorization to submit fingerprints to KSP for a fee-based state and federal background check pursuant to KRS 160.380.

NONCRIMINAL JUSTICE AGENCY CONTACT (NAC) & LOCAL AGENCY SECURITY OFFICER (LASO)

The Superintendent will designate employee(s) to serve as the NAC and LASO points of contact with KSP through which communication regarding audits, District personnel changes, training, and security are conducted. The NAC and LASO will receive and disseminate communication from KSP to all authorized District personnel. Additionally, the LASO shall where applicable:

1. Identify who is using the Criminal Justice Information Services (CJIS) Systems Agency (CSA) approved hardware, software, and firmware and ensure no unauthorized individuals or processes have access to the same.
2. Identify and document how the equipment is connected to the state system.
3. Ensure that personnel security screening procedures are being followed as stated.
4. Ensure approved and appropriate security measures are in place and working as expected.
5. Support policy compliance and ensure the CSA Information Security Officer is promptly informed of security incidents.

AUTHORIZED PERSONNEL

Authorized personnel will be given access to view and handle CHRI after completing the required Security Awareness Training and any additional training required by KSP. Only authorized personnel may access, discuss, use, possess, disseminate, or destroy CHRI.

The District will keep an updated list of authorized personnel that will be available to the KSP Auditor during the audit process.

TRAINING OF AUTHORIZED PERSONNEL

The District will ensure all persons authorized to have CHRI access will complete Security Awareness Training via CJIS Online immediately upon hire or appointment to access CHRI. The NAC will keep on file the Security Awareness Training certificate on all authorized personnel.

The District will ensure authorized users complete recertification of Security Awareness Training every ~~twelvetwenty-four~~ (1224) months.

Authorized personnel will review the KSP website Noncriminal Justice Agency (NCJA) section for policies, procedures, and forms necessary for CHRI handling and fitness determination.

Criminal History Record Information**FINGERPRINT CARD PROCESSING**

The District requires that all covered persons for whom fingerprint check is required must provide a valid, unexpired form of government-issued photo identification prior to fingerprinting to verify their identity.

A copy of the FBI Privacy Rights Notification will be provided to the covered persons prior to fingerprinting. Covered persons will also be advised of the process regarding a challenge of the criminal history record.

Covered persons that have disclosed a conviction must still be fingerprinted. Proper reason for fingerprinting must be documented in the "Reason for Fingerprinting" box.

Proper chain of custody procedures protecting the integrity of the covered person's fingerprints prior to submission will include maintaining fingerprints in a secure environment, in a sealed envelope.

COMMUNICATION

Authorized personnel may discuss the CHRI results with covered persons in a secure, private area. Extreme care will be taken to prevent overhearing, eavesdropping, or interception of communication.

The District will not allow a covered person to have a copy of their record or take a picture of it with an electronic device.

The District will provide the covered person with required forms and options to obtain their record if a record is to be challenged.

PHYSICAL SECURITY

The District will ensure that information system hardware, software, and media are physically protected through access control measures by ensuring the perimeter of a physically secured location shall be prominently posted and separated from non-secure locations by physical controls. The District will control all access points (except for those areas within the facility officially designated as publicly accessible) and will verify individual access authorizations before granting access. The District will control physical access to information system distribution and transmission lines within the physically secure location. The District will control physical access to information system devices that display Criminal Justice Information (CJI) and will position information system devices in such a way as to prevent unauthorized individuals from accessing and viewing CJI. The District will monitor physical access to the information system to detect and respond to physical security incidents. The District will control physical access by authenticating visitors before authorizing escorted access to the physically secure location (except for those areas designated as publicly accessible) and will escort visitors in a secured location.

Criminal History Record Information**STORAGE AND RETENTION OF CHRI**

The fingerprint results from KSP should only be handled by authorized personnel.

During the fitness determination:

- CHRI will be stored in a locked drawer/container at the Central Office and only accessible to authorized personnel.
- CHRI will be stored in a separate file that cannot be released for any public records request and will not be archived in a publicly accessible location.
- CHRI results will be stored electronically the agency using proper security and encryption methods.
- If stored electronically, the District will ensure compliance of CJIS Security Policy for the Network Infrastructure to include the following:
 1. Network Configuration
 2. Personally Owned Information Systems
 3. Publicly Accessible Computers
 4. System Use Notification
 5. Identification/User ID
 6. Authentication
 7. Session Lock
 8. Event Logging
 9. Advance Authentication
 10. Encryption
 11. Dial-up Access
 12. Mobile Devices
 13. Personal Firewalls
 14. Bluetooth Access
 15. Wireless (802.11x) Access
 16. Boundary Protection
 17. Intrusion Detection Tools and Techniques
 18. Malicious Code Protection
 19. Spam and Spyware Protection
 20. Security Alerts and Advisories
 21. Patch Management
 22. Voice over Internet Protocol (VoIP)
 23. Partitioning and Virtualization
 24. Cloud Computing
- Per KRS 61.878, CHRI is not subject to disclosure under the Kentucky Open Records Act and will not be archived in a publicly accessible location.

Criminal History Record Information**MEDIA TRANSPORT**

The District will protect and control digital and physical media during transport outside of controlled areas and will restrict the activities associated with transport of such media to authorized personnel.

DISPOSAL OF MEDIA CHRI

The District will properly sanitize or destroy physical or electronic CHRI per the Kentucky Department of Libraries and Archives (KDLA) Public School District Records Retention Schedule. If a third party performs the destruction, an authorized person shall accompany the CHRI through the destruction process. For electronic media, the District shall overwrite three (3) times or degauss digital media prior to disposal or release, inoperable digital media shall be destroyed; cut up, shredded, etc. The District shall ensure the sanitation or destruction is witnessed or carried out by authorized personnel.

MISUSE OF CHRI

In the event of deliberate or unintentional misuse of CHRI, the District will subject the employee to disciplinary action per Board policy and procedures, up to and including termination, or request for criminal investigation/charges.

Leave Request Form and Statement Affidavit

<p>**By stating the type of leave and signing above, you are certifying that you are qualified for the leave requested, as set forth in the Leave <u>Statement Affidavit</u> below:</p> <p>Comes the Affiant, after being duly sworn, and states as follows:</p> <p>I am submitting this request for the use of leave for one of the following purposes, as reflected above; that the facts supporting the request for leave are true and correct; and that to the best of my knowledge, information, and belief, I am qualified for the leave requested pursuant to applicable state statute and Board policy.</p> <p>S-1 - Sick leave based on personal illness or attending a doctor appointment;</p> <p>S-2 - Sick leave to attend to an immediate family member who was ill or had a doctor appointment;</p> <p>S-3 - Sick leave to mourn the death of an immediate family member</p> <p>SE - Sick leave for emergency purposes (A maximum 2 days per year for any of the following reasons: death of relative or personal friend; or personal disaster of the magnitude of tornadoes, fires, floods, etc.; or appearance as a witness or to produce documents when the employee's presence is required by subpoena. [This is not to include jury duty or appearances in actions in which the employee is a party and the subpoena is obtained by or on behalf of the employee.]; or such other reasons of an emergency, extraordinary nature or personal matter as approved by the Superintendent.</p> <p>P - Personal leave in compliance with and subject to qualifications set forth in Policy 03.1231/03.2231. This leave is personal in nature.</p> <p>U - Unpaid Personal leave Per Policy 03.1231/03.2231 this leave is personal in nature and I first sought and received approval in writing from my Principal/supervisor and the Superintendent/designee. (maximum of 5 days per year)</p>	<p>Notary Required (if no physician statement):</p> <p>S(1/2/3) = Sick</p> <p>SE = Sick Emergency</p> <p>P = Personal</p> <p>U = Unpaid Personal</p> <hr/> <p>Notary not required:</p> <p>J = Jury Duty</p> <p>NC = Non-Contract</p> <p>O – Other</p> <p>PD = Professional Development</p> <p>V = Vacation</p>
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EXPLANATION: HB 331 AMENDS KRS 158.162 REGARDING TRAINING REQUIREMENTS FOR USE OF AUTOMATED EXTERNAL DEFIBRILLATORS(AEDS)
FINANCIAL IMPLICATIONS: COSTS OF PURCHASING, MAINTAINING AEDS, TRAINING COSTS

EXPLANATION: SB 1 (2022) CHANGED THE PROCESS FOR HIRING THE PRINCIPAL FROM THE COUNCIL TO THE SUPERINTENDENT WITH CONSULTATION
WITH THE COUNCIL AND REMOVED THE REQUIRED TRAINING ON INTERVIEWING TECHNIQUES.
FINANCIAL IMPLICATIONS: SAVINGS ON TRAINING COSTS

District Training Requirements

SCHOOL YEAR:

This form may be used to track completion of local and state employee training requirements that apply across the District and maintain a record for the information of the Superintendent and Board.

TOPIC	LEGAL CITATION	RELATED POLICY	EMPLOYEES OR OTHERS AS DESIGNATED			DATE COMPLETED
			CERTIFIED	ALL	DESIGNATED	
District planning committee members.		01.111			✓	
Board member training hours.	KRS 160.180; 702 KAR 1:115; 701 KAR 8:020	01.83			✓	
Superintendent training program to be completed within two (2) years of taking office.	KRS 160.350	02.12			✓	
Certified Evaluation Training.	KRS 156.557; 704 KAR 3:370	02.14/03.18	✓		✓	
Supervisors shall receive appropriate training to equip them to meet the standards of Personnel Management.		02.3			✓	
All School Resource Officers (SROs) shall successfully complete forty (40) hours of annual in service training that has been certified or recognized by the Kentucky Law Enforcement Council for SROs.	KRS 158.4414	02.31			✓	
Council member training required for Principal selection.	KRS 160.345	02.4244			✓	
Council member training hours.	KRS 160.345	02.431			✓	
Employees authorized to use Criminal History Record Information (CHRI) will complete Security Awareness Training via Criminal Justice Information Services (CJIS)	KRS 160.380	03.11 AP.2521			✓	
Initial/follow-up training for coaches of interscholastic athletic activities or sports.	KRS 160.445; KRS 161.166; KRS 161.185; 702 KAR 7:065	03.1161 03.2141 09.311			✓	
Asbestos Containing Building Material (ACBM), Lockout/Tagout and personal protective equipment (PPE) training for designated employees.	40 C.F.R. Part 763 401 KAR 58:010 803 KAR 2:308 OSHA 29 C.F.R. 1910.132 29 C.F.R. 1910.147 29 C.F.R. 1910.1200	03.14/03.24			✓	
Bloodborne pathogens.	OSHA 29 C.F.R. 1910.1030	03.14/03.24		✓		
Behaviors prohibited/required reporting of harassment/discrimination.	34 C.F.R. 106.1-106.71, U.S. Department of Education Office for Civil Rights Guidance	03.162/03.262		✓		

District Training Requirements

TOPIC	LEGAL CITATION	RELATED POLICY	EMPLOYEES OR OTHERS AS DESIGNATED		DATE COMPLETED
			CERTIFIED	DESIGNATED ALL	
Title IX Sexual Harassment	34 C.F.R. § 106.45	03.1621/03.2621/09.428111	✓	✓	
Teacher professional development/learning.	KRS 156.095	03.19	✓		
Active Shooter Situations.	KRS 156.095	03.19/03.29		✓	
Instructional leader training.	KRS 156.101	03.1912		✓	
The Superintendent shall develop and implement a program for continuing training for selected classified personnel.		03.29		✓	
Training of the instructional teachers' aide with the certified employee to whom s/he is assigned.	KRS 161.044	03.5		✓	
Orientation materials for volunteers.	KRS 161.048	03.6		✓	
Integrated Pest Management (7a) Certification.	302 KAR 29:060	05.11		✓	
Training for designated personnel on use and management of equipment.		05.4		✓	
Training on use of such.	KRS 158.162	03.1161/03.2241		✓	
School Safety Coordinator (SSC) training program developed by the Kentucky Center for School Safety (KCSS)	KRS 311.667	05.4/09.311/09.224		✓	
School Principal training on procedures for completion of the required school security risk assessment.	KRS 158.4412	05.4		✓	
Fire drill procedure system.	KRS 158.162	05.41		✓	
Lockdown drill procedure system.	KRS 158.162	05.411		✓	
	KRS 158.164				
Severe Weather/Tornado drill procedure system.	KRS 158.162	05.42		✓	
	KRS 158.163				
Earthquake drill procedure system.	<u>KRS 158.162</u>	05.47		✓	
	KRS 158.163				
First Aid and Cardiopulmonary Resuscitation (CPR) Training.	702 KAR 5:080	06.221		✓	
Annual in-service school bus driver training.	702 KAR 5:030	06.23		✓	
Designated training for School Nutrition Program Directors and food service personnel.	KRS 158.852	07.1		✓	
	7 C.F.R. §210.31	07.16			
Teachers of gifted/talented students required training on identifying and working with gifted/talented students. All other personnel working with gifted students shall be prepared through appropriate professional development to address the individual needs, interests, and abilities of the students.	704 KAR 3:285	08.132	✓		

District Training Requirements

TOPIC	LEGAL CITATION	RELATED POLICY	EMPLOYEES OR OTHERS AS DESIGNATED		DATE COMPLETED
			CERTIFIED	ALL DESIGNATED	
KDE to provide training to address the characteristics and instructional needs of students at risk of school failure and most likely to drop out of school.	KRS 156.095	08.141	✓	✓	
Student training on appropriate online behavior on social networking sites and cyberbullying awareness and response.	47 U.S.C. 254/Children's Internet Protection Act; 47 C.F.R. 54.520	08.2323		✓	
Confidentiality of student record information.	34 C.F.R. 300.623	09.14	✓		
Student suicide prevention training: Minimum of one (1) hour in-person, live stream, or via video recording every year including the recognition of signs and symptoms of possible mental illness. New hires during off year to receive suicide prevention materials to review. [Employees with job duties requiring direct contact with students in grades six (6) through twelve (12).]	KRS 156.095; KRS 158.070	09.22		✓	
At least one (1) hour of self-study review of seizure disorder materials required for all principals, guidance counselors, and teachers by July 1, 2019, and for all principals, guidance counselors, and teachers hired after July 1, 2019.	KRS 158.070	09.22		✓	
Training for school personnel authorized to give medication.	KRS 158.838 KRS 156.502 702 KAR 1:160	09.22 09.224 09.2241		✓	
Training on employee reports of criminal activity.	KRS 158.148; KRS 158.154; KRS 158.155; KRS 158.156; KRS 620.030	09.2211	✓		
Personnel training on restraint and seclusion and positive behavioral supports.	704 KAR 7:160	09.2212	✓	✓	
Personnel training child abuse and neglect prevention, recognition, and reporting.	KRS 156.095	09.227	✓	✓	
Age appropriate training for students during the first month of school on behaviors prohibited/required reporting of harassment/discrimination.	34 C.F.R. 106.1-106.71, U.S. Department of Education Office for Civil Rights Guidance	09.42811		✓	

District Training Requirements

TOPIC	LEGAL CITATION	RELATED POLICY	EMPLOYEES OR OTHERS AS DESIGNATED			DATE COMPLETED
			CERTIFIED	ALL	DESIGNATED	
Training to build capacity of staff and administrators to deliver high-quality services and programming in the District's Alternative Education Program. Student discipline code.	704 KAR 19:002	09.4341			✓	
Intervention and response training on responding to instances of incivility.	KRS 158.148; KRS 158.156; KRS 158.444; KRS 525.070; KRS 525.080	09.438		✓		
Training for Supervisors of Student Teachers.	16 KAR 5:040	10.21		✓		
Career Tech – If funds available, High School teachers to receive training regarding embedding reading, math, and science in career tech courses.	KRS 158.818				✓	
Committee for Mathematics Achievement – training for teachers based on available funds.	KRS 158.832		✓			
KDE to provide or facilitate statewide training for teachers and administrators regarding content standards, integrating performance assessments, communication, and higher order thinking.	KRS 158.6453 (SB 1)		✓			
Grants regarding training for state-funded community education directors.	KRS 160.156				✓	
Local Board to develop and implement orientation program for adjunct instructors.	KRS 161.046				✓	
KDE shall provide technical assistance and training for multi-tiered system of supports upon District request.	KRS 158.305				✓	

THIS IS NOT AN EXHAUSTIVE LIST – CONSULT OSHA/ADA AND BOARD POLICIES FOR OTHER TRAINING REQUIREMENTS.

For training provided in person, participants should sign in at the end of the meeting to document their attendance. The sign-in sheet shall be maintained in paper or electronic format as required by the Kentucky *Records Retention/Public School District Schedule*.

EXPLANATION: HB 32 AMENDS KRS 161.011 TO PERMIT HIRING OF CLASSIFIED PERSONNEL WITHOUT A HIGH SCHOOL DIPLOMA IF OPPORTUNITY TO OBTAIN A HIGH SCHOOL EQUIVALENCY DIPLOMA IS PROVIDED BY THE DISTRICT AND PERMITS CERTAIN GOVERNMENT ISSUED CERTIFICATIONS OR LICENSES TO SUBSTITUTE.

FINANCIAL IMPLICATIONS: POTENTIAL COSTS ASSOCIATED WITH ADMINISTERING THE EQUIVALENCY PROGRAM.

EXPLANATION: HB 13 AMENDS KRS 281A.175 RELATED TO THE PHYSICAL EXAM REQUIREMENT FOR SCHOOL BUS DRIVERS. IT CHANGES THE REQUIRED PHYSICAL EXAM FROM EVERY YEAR TO EVERY TWO (2) YEARS.

FINANCIAL IMPLICATIONS: LESS FREQUENT EXAMS COULD BE A COST SAVINGS.

PERSONNEL

03.221 AP.22

- CLASSIFIED PERSONNEL -

Personnel Documents

EMPLOYEE'S NAME _____ POSITION/WORK SITE _____

REQUIREMENTS

Employment shall be contingent upon meeting all requirements (state and local) for the position. Employees shall provide the following documents to the Central Office.

- HIGH SCHOOL DIPLOMA (OR HIGH SCHOOL EQUIVALENCY DIPLOMA ~~OR PROOF OF PROGRESS TOWARD HIGH SCHOOL EQUIVALENCY DIPLOMA~~ FOR STAFF EMPLOYED AFTER 7/31/90.)** Licenses or credentials issued by a government entity that require specialized skill or training may also substitute for this requirement.
- APPLICATION (INCLUDING REFERENCES, A LIST OF STATES OF FORMER RESIDENCE AND DATES OF RESIDENCY, AND PICTURE IDENTIFICATION)**
- CERTIFICATION (I.E., CDL FOR BUS DRIVERS) OR LICENSURE, WHERE APPLICABLE**
- SIGNED CONTRACT (WITH LETTER OF NOTIFICATION OF EMPLOYMENT)**
- VERIFICATION OF EXPERIENCE:** Verification from each school district or the Kentucky Department of Education for which there is experience. (This must be on file before salary can be received based on that experience). Central Office personnel will write for verification after the names of the school districts have been provided.
- HEALTH CERTIFICATION:** Each regular or substitute employee must have a medical examination, which shall include a tuberculin risk assessment, prior to initial employment, and proof shall be filed with the Central Office. Individuals identified as being at high risk for TB shall be required to undergo a tuberculin skin test or a blood test for Mycobacterium tuberculosis (BAMT) as required by 702 KAR 1:160. This form is required every two (2) years annually for school bus drivers, ~~as are required~~ Drug testing results are required each year. Health certification records shall also include results from Hepatitis B vaccinations, if the position so requires.
- MEMBERSHIP APPLICATION TO THE COUNTY EMPLOYEES' RETIREMENT SYSTEM:** Each regular full time classified employee must file a membership application with the County Employees' Retirement System if they are not already a member or if they have previously withdrawn their account.
- TAX WITHHOLDING EXEMPTION CERTIFICATES:** Each employee is to complete a copy of Form K-4 (State) and Form W-4 (Federal) for their file. (New certificates must be completed any time the employee makes a change in the number of exemptions claimed or the amount to be deducted.)
- CRIMINAL RECORDS CHECK FORM:** Required by state and District. New classified employees must be fingerprinted at the Central Office.

Personnel Documents**REQUIREMENTS (CONTINUED)**

- LETTER FROM CABINET FOR HEALTH AND FAMILY SERVICES:** Applicants (hired on or after April 4, 2018) must provide a letter from the Cabinet for Health and Family Services stating that there are no administrative findings of child abuse or neglect on record.
- DRIVING RECORDS CHECK FORM:** Required by state for all bus drivers and by the District, if applicable, for other classified personnel. Form will be mailed by Central Office personnel to the Kentucky Transportation Cabinet, Division of Driver Licensing.
- I-9 FORM:** Required by federal law to determine eligibility for employment in the United States.
- COMMERCIAL DRIVER'S LICENSE:** Must be presented to the Superintendent's designee by each regular or substitute bus driver employed by the District prior to assuming the duties of the position.
- CAFETERIA BENEFIT PLAN APPLICATION, if applicable:** Must be completed by every full-time employee of the School District. (This is usually done shortly after the opening of school by a person who visits each school to have the forms completed.)
- FOOD SAFETY TRAINING CERTIFICATE, if applicable:** Must be presented to the Superintendent's designee by each regular or substitute food service employee of the School District prior to assuming the duties of the position, if required by the county/district Health Department.

Personnel records also may include the following: evaluation documents; documentation of personnel actions (promotions, transfers, demotions, disciplinary actions, nonrenewals, terminations); record of professional development activities, and other payroll-related information (insurance forms/deductions and direct deposit authorizations).

EXPLANATION: HB 319 REMOVES THE REQUIREMENT THAT AN AFFIDAVIT BE SUBMITTED FOR SICK (INCLUDING EMERGENCY LEAVE USED FOR THIS PURPOSE) AND PERSONAL LEAVE AND REPLACES AFFIDAVIT WITH STATEMENT.
FINANCIAL IMPLICATIONS: NONE ANTICIPATED

PERSONNEL

03.223 AP.2

Leave Request Form and [StatementAffidavit](#)

See Procedure 03.123 AP.2/Leave Request Form and [StatementAffidavit](#).

EXPLANATION: HB 331 AMENDS KRS 158.162 TO REQUIRE EACH SCHOOL TO HAVE A WRITTEN CARDIAC EMERGENCY RESPONSE PLAN. IT ALSO REQUIRES THE DISTRICT TO MAINTAIN A PORTABLE AUTOMATED EXTERNAL DEFIBRILLATOR (AED) IN EVERY MIDDLE AND HIGH SCHOOL BUILDING, AND AS FUNDS BECOME AVAILABLE, AT SCHOOL-SANCTIONED MIDDLE AND HIGH SCHOOL ATHLETIC PRACTICES AND COMPETITIONS, AND TO ADOPT PROCEDURES FOR THE USE OF AEDS DURING EMERGENCIES.

FINANCIAL IMPLICATIONS: COSTS OF PURCHASING, MAINTAINING AEDS, COPYING AND DISTRIBUTING PLANS, AND PERSONNEL TRAINING COSTS

SCHOOL FACILITIES

05.4 AP.1

Use of Automated External Defibrillators (AEDs)

Each school's emergency plan shall include procedures to be followed in case of a medical emergency, a written cardiac emergency response plan, and a diagram that clearly identifies the location of each AED. Procedures for the use and training of AEDs shall be included in the emergency response plan.

EXPLANATION: HB 331 AMENDS KRS 158.162 TO REQUIRE EACH SCHOOL TO HAVE A WRITTEN CARDIAC EMERGENCY RESPONSE PLAN. IT ALSO REQUIRES THE DISTRICT TO MAINTAIN A PORTABLE AUTOMATED EXTERNAL DEFIBRILLATOR (AED) IN EVERY MIDDLE AND HIGH SCHOOL BUILDING, AND AS FUNDS BECOME AVAILABLE, AT SCHOOL-SANCTIONED MIDDLE AND HIGH SCHOOL ATHLETIC PRACTICES AND COMPETITIONS, AND TO ADOPT PROCEDURES FOR THE USE OF AEDS DURING EMERGENCIES.

FINANCIAL IMPLICATIONS: COSTS OF PURCHASING, MAINTAINING AEDS, COPYING AND DISTRIBUTING PLANS, AND PERSONNEL TRAINING COSTS

SCHOOL FACILITIES

\$05.4 AP.23

Compliance with Automated External Defibrillator (AED) Requirements

Name of Employee: _____ Date of Training: _____

Having completed the required AED training, I hereby confirm that I have read and understand the policies and procedures for use of AEDs for the District.

Should I have questions at any time while serving as an Expected AED User, I shall contact the designated AED contact for clarification. I agree to follow the terms and guidelines set forth in policy and procedures for this District.

Expected AED User's Signature Date

Superintendent/designee's Signature Date

EXPLANATION: HB 331 AMENDS KRS 158.162 TO REQUIRE EACH SCHOOL TO HAVE A WRITTEN CARDIAC EMERGENCY RESPONSE PLAN. IT ALSO REQUIRES THE DISTRICT TO MAINTAIN A PORTABLE AUTOMATED EXTERNAL DEFIBRILLATOR (AED) IN EVERY MIDDLE AND HIGH SCHOOL BUILDING, AND AS FUNDS BECOME AVAILABLE, AT SCHOOL-SANCTIONED MIDDLE AND HIGH SCHOOL ATHLETIC PRACTICES AND COMPETITIONS, AND TO ADOPT PROCEDURES FOR THE USE OF AEDS DURING EMERGENCIES.

FINANCIAL IMPLICATIONS: COSTS OF PURCHASING, MAINTAINING AEDS, COPYING AND DISTRIBUTING PLANS, AND PERSONNEL TRAINING COSTS

SCHOOL FACILITIES

\$05.4 AP.231

Automated External Defibrillator (AED) Reporting Form

Submit this form to Superintendent/designee within forty-eight (48) hours of AED use.

AED USER: _____

LOCATION OF AED USE: _____

NAME: _____

DATE OF INCIDENT: _____

Staff Member

Student

Parent/Visitor

Condition upon arrival (check all that apply)

unconscious

not breathing

no pulse and/or shows signs of circulation such as normal breathing, coughing or movement

NUMBER OF DEFIBRILLATIONS: _____

Please describe the incident from the beginning of the emergency until its conclusion:

Were efforts terminated? Yes No If yes, please explain.

Signature of AED User

Date

EXPLANATION: HB 522 AMENDS KRS 45A.385 AND KRS 424.260 INCREASING THE AGGREGATE CONTRACT AMOUNT MAXIMUM FOR SMALL PURCHASE TO \$40,000.
FINANCIAL IMPLICATIONS: LARGER AMOUNT FOR SMALL PURCHASE PROCEDURES

SUPPORT SERVICES

07.13 AP.1

Bidding of School Food Service Supplies

LIKE ITEMS IN EXCESS OF ~~\$30,000~~40,000

If the total amount of purchases for like items is ~~\$30,000~~40,000 or more, formal bid procedures will be utilized. Food, food products, supplies, and equipment will be bid annually in August.

BID SPECIFICATIONS

1. The bid specifications, including delivery and storage instructions, for all lunchroom/cafeteria supplies shall be prepared by the School Food Service/School Nutrition Program Director.
2. The request for bid shall be advertised in the local newspaper with the greatest circulation in the District.
3. Specifications and bid documents shall be mailed to all potential bidders.
4. Bids shall be opened and tabulated by the School Food Service/School Nutrition Program Director.
5. The bids shall be submitted to the Board of Education for action.

PERISHABLES

Applicable federal law does not provide a bidding exception for perishable food items purchased with school food service funds. Perishables purchased using school food service funds shall be procured in accordance with 2 C.F.R. 200.320.

EMERGENCY PURCHASES

If it is necessary to make an emergency purchase in order to continue service, the purchase shall be made and a log of all such purchases shall be maintained and reviewed by the School Food Service/School Nutrition Program Director.

The log of emergency purchases shall include: item name, dollar amount, vendor, and reason for emergency.

RECORDS MANAGEMENT

The following records will be maintained for a period of three (3) years plus the current year:

1. Records of all phone quotes
2. Logs of all emergency and noncompetitive purchases
3. All written quotes and bid documents
4. Comparison of all price quotes and bids with the effective dates shown
5. Price comparison showing bid or quote awarded
6. Log of approval substitutions

RELATED PROCEDURE:

04.32 AP.1

EXPLANATION: SB 5 CREATES A NEW SECTION OF KRS 158 TO REQUIRE THE BOARD TO ADOPT A COMPLAINT RESOLUTION POLICY FOR PARENTS OR GUARDIANS ALLEGING THAT MATERIAL, A PROGRAM, OR AN EVENT THAT IS "HARMFUL TO MINORS" HAS BEEN PROVIDED OR IS CURRENTLY AVAILABLE TO THEIR STUDENT ENROLLED IN THE DISTRICT.

FINANCIAL IMPLICATIONS: TIME SPENT INVESTIGATING, RESPONDING TO APPEALS, COST OF NEWSPAPER ADVERTISEMENT REGARDING FINAL OUTCOME

STUDENTS

08.23 AP.21

"Harmful to Minors" Complaint Resolution Process

This parent or guardian complaint must be submitted in writing to the Principal of the school where the student is enrolled alleging that material, a program, or an event that is "harmful to minors" has been provided or is currently available to the child of the parent or guardian.

"Harmful to minors" is defined in KRS 158.192 and Policy 08.23.

COMPLAINANT (PARENT OR GUARDIAN)

Complainant Name _____ Date _____

Home Address _____ Phone _____

Student Name(s) _____

Home Address _____ Phone _____

School _____ Grade Level _____

COMPLAINT(S)

A reasonably detailed description of the material, program, or event that is alleged to be "harmful to minors," and how the material, program, or event is believed to be "harmful to minors." (Use additional sheet if necessary.)

_____ Date _____
Complainant's Signature

LEVEL ONE: SCHOOL PRINCIPAL NAME:

Within seven (7) business days of receiving a written complaint, the Principal shall review the complaint and take reasonable steps to investigate the allegations in the complaint, including but not limited to reviewing the material, program, or event that is alleged to be "harmful to minors;"

Per KRS 158.192, the Principal shall determine whether:

- The material, program, or event that is the subject of the complaint is "harmful to minors;"
- Student access to material that is the subject of the complaint shall remain, be restricted, or be removed;
- A program or event that is the subject of the complaint shall be eligible for future participation by students in the school.

“Harmful to Minors” Complaint Resolution Process

COMPLAINT(S) (CONTINUED)

Within ten (10) business days of receiving the complaint, unless another schedule is mutually agreed to by the parent or guardian and the Principal, the Principal shall confer with the parent or guardian and inform him or her whether the material, program, or event that is the subject of the complaint was determined to be “harmful to minors” and what the resolution will be.

PRINCIPAL’S DETERMINATION (USE ADDITIONAL SHEET IF NECESSARY.)

Principal’s Signature Date

A parent or guardian not having filed the appeal may request in writing access to the appealed materials, programs, or events for review and shall abide by the school's and District's policies and procedures when requesting and reviewing such information.

LEVEL TWO: APPEAL OF THE PRINCIPAL’S DETERMINATION TO THE BOARD

Complainant Name: _____

Date appeal received at this level: _____

The parent or guardian shall make any appeal within ten (10) days. The appeal shall:

- Be subject to full administrative and substantive review by Board and shall not be delegated;
- Include an opportunity for the parent or guardian to provide input during public comment at a Board meeting;
- Be completed within thirty (30) calendar days of receiving the written appeal unless another time frame is mutually agreed upon by the parent or guardian and the Board; and
- Be discussed and voted on during a meeting of the Board subject to the open records and open meeting requirements under KRS Chapter 61.

“Harmful to Minors” Complaint Resolution Process

LEVEL TWO: APPEAL OF THE PRINCIPAL’S DETERMINATION TO THE BOARD (CONTINUED)
(USE ADDITIONAL SHEET IF NECESSARY.)

_____ Complainant’s Signature _____ Date

The Board's final disposition of the appeal shall be made in writing and shall state whether the material, program, or event was determined to be “harmful to minors” and whether student access to the material will remain, be restricted, or be removed and whether the program or event shall be eligible for future participation by students in the school.

Within fifteen (15) business days from the date of a final disposition, the title of the material or a description of the program or event submitted for appeal, whether the material, program, or event was determined to be “harmful to minors,” whether student access to the material will remain, be restricted, or be removed or whether the program or event shall be eligible for future participation by students in the school, and the vote cast by each individual Board member shall:

- Be published on the website of the Board where it shall remain available for review; and
- Be published in the newspaper with the largest circulation in the county.

BOARD’S FINAL DISPOSITION (USE ADDITIONAL SHEET IF NECESSARY.)

Board Member Name: _____ Vote: _____

Board Member Name: _____ Vote: _____

Board Member Name: _____ Vote: _____

Board Member Name: _____ Vote: _____

Board Member Name: _____ Vote: _____

_____ Board Chair’s Signature _____ Date

EXPLANATION: REVISIONS TO 704 KAR 19:002 REQUIRE THE DISTRICT TO DEVELOP PROCEDURES FOR MONITORING THE ALTERNATIVE EDUCATION PROGRAM.
FINANCIAL IMPLICATIONS: NONE ANTICIPATED

STUDENTS

09.4341 AP.11

Alternative Education

MONITORING

The District shall provide for:

1. Regular, periodic monitoring of the alternative education program; and
2. Selecting, implementing, and monitoring the impact of professional learning designed to meet the needs of the teachers and students served by the alternative education program.

Student Medication Guidelines

STUDENT SELF-MEDICATION AND ADMINISTRATION

With the written permission of parent/guardian, ~~and~~ approval by the Principal, and notification to the school nurse office, students may be authorized to carry on their person and independently take their own emergency medication (prescription injectable epinephrine device, inhaler, glucagon, insulin, etc. or nonprescription). Such approval shall assure school personnel that the child has been properly instructed in self-administering the medication. If prescription medication is involved, written authorization of the student's health care practitioner also is required.

If the student does not wish to carry emergency medication on their person, it shall be kept in a ~~secure~~locked cabinet in the ~~school office or in the~~ nurse's office unless otherwise approved by the Principal or designated staff.

If at any time a student demonstrates an inability to self-administer medication properly during school hours, s/he will lose the right to do so. The parent/guardian will be notified immediately of this situation and offered a meeting with the nurse or the school Principal if desired.

The District emergency action plan to address allergic reactions -- to protein in food, medication, pollen or insect stings -- occurring in students with no history of anaphylaxis; asthma attacks, non-responsive to emergency medication provided by the parent/guardian; hypoglycemic crisis, non-responsive to emergency oral medications as ordered by the physician/health care provider is as follows:

- Have the Nurse or another adult STAY WITH THE STUDENT. Call 911 or have someone call 911.
- Notify the Building Administrator.
- Notify the Parent/Guardian.
- Complete a Student Accident Report.

ALL OTHER MEDICATIONS

Medication should be given at home when possible. However, the Henderson County Board of Education will assist in maintaining medication schedules for any student who requires such medication to attend school. It is District policy that trained staff members of Henderson County Schools shall be permitted to administer medication during school hours if it is not feasible for the parent to do so. Medication that must be given at school should be brought to school by the parent/guardian whenever possible. ~~Medication that is sent to school with the student should be transported in the original container placed in a sealed envelope and given to designated school personnel immediately upon arrival.~~

Prescribed oral medications in pill or tablet form shall be counted and the number recorded on the Medication Administration Record.

The goal of the Henderson County Schools' medication administration policy is to ensure safe and appropriate medication administration by staff members when necessary.

Student Medication Guidelines

MEDICATION ADMINISTRATION

Except for emergency medications (including, but not limited to FDA approved seizure rescue medications and injectable epinephrine devices) and medications approved for students to carry for self-medication purposes, storage of all medications shall be in a secure, safe locked cabinet accessible only to the responsible authorized school personnel. Medications requiring refrigeration shall be stored in a separate refrigerator in a supervised area.

Parents/guardians shall be informed of policy and procedure requirements. School personnel responsible for the safe and appropriate administration of medication shall not be permitted to administer medication if the requirements outlined in this procedure are not followed. In such situations, the parent/guardian will be notified by telephone and/or written notice.

The parent or legal guardian must complete and sign a Board-approved authorization for administration of any medication at school. This authorization must contain the following information: the student's physician/health care provider, the full name of the medication(s) approved, the dosage approved/prescribed, the time(s) administration required during school hours, known allergies, and any known side effects of medication(s) approved. This medication authorization must be completed each school year, and must be updated with any medication or regimen change.

A parent/guardian's hand written request for staff to administer medication to a student shall be honored for that day only. This written request must contain the following information:

- Student Name
- Medication Name
- Proper dosage in accordance with pharmacy label or the recommended dosage label on over-the-counter medications
- Appropriate time(s) to administer the medication with regard to pharmacy label or dosage label
- The date
- Parent/Legal Guardian signature

GENERAL MEDICATION

All prescriptions and over-the-counter (OTC) medications brought into Henderson County Schools ~~from the student's home~~ shall be taken to the school's office immediately upon arrival at school. Students in violation of this shall be subject to disciplinary action by the Principal of the school. A signed, completed consent must accompany the medication or it must be completed at that time by the parent/guardian. Medications not accompanied by a written, signed consent form shall not be administered.

Guidelines for Medication Distribution

GENERAL MEDICATION (CONTINUED)

All medications shall be brought to the school by a parent/guardian or other designated adult. In the event the parent/guardian cannot bring the medication to school, it is that parent/guardian's responsibility to notify the school. The school Principal or designated staff must give approval before the student transports the medication to school if the student is in elementary school. ~~In general, Middle and High School students may transport medication to school if they meet District requirements to take this medication to the nurse's office immediately upon their arrival to school.~~

No products containing aspirin (ASA, ~~acetylsalicylic~~ acetylsalicylic acid) shall be given without a physician/health care provider's order. This includes medications such as Pepto-Bismol that carry warnings regarding Reye's syndrome.

All medications must be in their original container, match the container's label and have unexpired dates. No two (2) liquid medications may be mixed. No two (2) medications may be in the same bottle. A licensed physician/health care provider must prescribe the medication for the student. A pharmacy approved measuring device must accompany liquid prescriptions.

Students are to be supervised by an authorized individual while taking any medication.

The first dose of any medication is recommended to be given at home under parental/guardian supervision.

Medication shall not be "borrowed" from another student for administration—even from a sibling with identical medication. Contact the parent/guardian by telephone and alert them of the need for medication.

Students shall not share any medication, prescription or over-the-counter, with another student. Each school year the District shall notify students of this prohibition. Violations shall result in appropriate disciplinary action, including but not limited to, suspension or expulsion.

Non-prescription medication without a physician/health care provider's order left at school will be destroyed after ten (10) days. Prescription and non-prescription medication(s) with expired dates will be destroyed to ensure the safety of all students. All medications left at school at the end of the last day of the school year will be destroyed by the school nurse and or the school Principal to ensure the safety of all students.

PRESCRIPTION MEDICATIONS

Prescription medication must have the original pharmacy label containing the following: the student's name, the physician/health care provider's name, the medication name, strength, dosage, date dispensed, date of expiration, time for administration, and the dispensing pharmacy. Medication stating "one time a day," "at bedtime," "QD (every day)," indicate medication is to be given at home and not during school hours. ~~School personnel will refuse medication with such labels.~~

Medication with labels altered in any way will be refused per KRS 218a.210, "a person to whom or for whose use of any controlled substance has been presented, sold or dispensed by a practitioner or other persons authorized under this chapter, may lawfully possess it only in the container in which it was delivered to him by the person selling or dispensing the same."

Student Medication Guidelines

PRESCRIPTION MEDICATIONS (CONTINUED)

Prescription medications required daily at school shall be limited to no more than a thirty (30) day supply. Medication shall be counted upon receipt from the parent/guardian and be documented on the medication administration log for the medication. ~~Students who receive approval to transport medication may bring a parent/guardian signed refill slip.~~

Changes in the dosage and/or times of administration must be received in the form of a written order from the physician/health care provider or a new prescription bottle from the pharmacy indicating the change and a signed note from the parent/guardian.

NONPRESCRIPTION MEDICATIONS

Over-the-counter medications (OTC) ~~brought from the student's home~~ must be received in the original container, be age appropriate, dated upon receipt, and shall be given no more than three (3) consecutive days without an order from the physician/health care provider. OTC medication shall not be administered beyond its expiration date. No aspirin containing medications will be given at school without a physician's order (this includes but is not limited to, Bayer, Anacin, Pepto-Bismol, Bufferin, Excedrin). Also please note that cough drops are an OTC medication.

MEDICATION ADMINISTRATION BY THE STUDENT

~~The District emergency action plan to address allergic reactions to protein in food, medication, pollen or insect stings occurring in students with no history of anaphylaxis; asthma attacks; non-responsive to emergency medication provided by the parent/guardian; hypoglycemic crisis; non-responsive to emergency oral medications as ordered by the physician/health care provider is as follows:~~

- ~~• Have the Nurse or another adult STAY WITH THE STUDENT. Call 911 or have someone call 911.~~
- ~~• Notify the Building Administrator.~~
- ~~• Notify the Parent/Guardian.~~
- ~~• Complete a Student Accident Report.~~

NON-EMERGENCY FIRST AID AND COMFORT MEASURES

~~Non-emergency first aid and comfort measures such as triple antibiotic ointment, sunburn relief spray and other appropriate over the counter medications shall be administered only with the express written consent of the student's parent/legal guardian.~~ Only the school nurse or a designated staff member trained in medication administration shall administer such first aid and comfort measures. Such first aid and comfort measures shall be documented on the daily log or on the nurse's notes in the student's health file.

Student Medication Guidelines

FIELD TRIP MEDICATION ADMINISTRATION

If a student is attending a field trip away from school during his/her scheduled medication time, school personnel, trained annually in field trip medication administration, will be designated to administer the medication while on the field trip. Notification and preparation for administering medication during a field trip should begin well in advance of the day of the field trip. Student medication may not be repackaged for field trips by school personnel. The school should request the parents bring in a separate bottle with enough medication for the field trip day. The medication should also have a pharmacy prescription label attached. Consult local policies and procedures for field trip medication administration.

DOCUMENTATION

Administration of medication(s) shall be immediately documented on a board-approved medication log or the student information system. The log must contain signature(s) of person(s) administering medication and dosage administered. Subject to confidentiality requirements in Policy 09.14, upon completion, or change in medication, the log is to be kept in the student's health file for no less than one (1) year. Documentation shall reflect the starting and ending dates, as well as missed doses and absences.

If a student refuses a medication, or is highly resistant to taking medication, the parent/guardian shall be contacted immediately. The medication may be documented as "R," refused on the log. If necessary, a conference may be scheduled with the parent/guardian to resolve the conflict.

Prescription medications, with the exception of antibiotics, must be counted and the number documented on the medication log in the nurse's office. Licensed nurses may count without a co-signer. Non-licensed staff designated by the District shall have a co-signer when counting medications.

DISPOSAL OF UNUSED MEDICATION

Notice shall be givenmailed to the parent/guardian prior to the end of the school year informing them that their child has medication remaining and that it must be picked up by the parent/guardian. If the medication is not retrieved, the school nurse or designated staff member, with a witness present, shall count the number of any pills or tablets remaining and document the amount on the Medication Log. Leftover prescription medication may then be mixed with a designated substance, such as glue for pills and kitty litter for liquids, and placed in a trash receptacle or destroyed in accordance with current health care standards. Both parties shall sign the Medication Log when this is completed. All medications shall be destroyed if the parent/guardian does not pick them up.

Student Medication Guidelines**MEDICATION ERROR**

Medication administration error may occur. The following steps shall be initiated immediately:

1. Keep the student in the first-aid location.
2. Assess the student for any obvious ill effects and document.
3. Identify the incorrect dose and/or type of medication taken by the student.
4. Immediately notify the school administrator and District nurse of the error, who shall notify the student's parent/guardian.
5. Notify the student's physician/health care provider.
6. If unable to contact the physician/health care provider, contact the Poison Control Center for instructions. 1-800-722-5725.
7. Carefully record all circumstances and actions taken, including instructions from the Poison Control Center or physician, and the student's status.
8. Complete a "Medication Administration Incident Report" form.

Students shall not share any medication, prescription or over-the-counter, with another student. Each school year the District shall notify students of this prohibition and that violations shall result in appropriate disciplinary action, including but not limited to suspension or expulsion.

RELATED PROCEDURE:

09.2241 AP.2

Administering Medication at School Forms
Consent, Release, and Covenant for Administering Medication

The undersigned parent(s), guardian(s), requests employees of the District to administer medicine(s) at the designated times to the hereinafter named student:

Student _____ Birthdate _____

School _____ Phone _____

Name of medication _____ Dosage (mg.) _____ Time _____

Name of medication _____ Dosage (mg.) _____ Time _____

Name of medication _____ Dosage (mg.) _____ Time _____

Time(s) medication is to be given only while student is at school: _____

Diagnosis or reason for the medication(s) listed above: _____

Prescribing physician: _____

I understand the Board of Education Medication Policies and Procedures, Coded 09.2241, of the Board of Education Policies and Procedures Manual.

I hereby agree to release and hold the school staff free and harmless for any claims, demands, or suits for damages from any injury or complication that may result from such treatment.

I have read this consent form and understand all its terms. I execute it voluntarily and with full knowledge of its significance.

I give my permission for the District schools and the attending physician to exchange information concerning my child's medical records.

Parent/Guardian Date

Parent/Guardian Date

Administering Medication at School Forms
Medication Administration Incident Report

School _____

Student _____

Birthdate _____ Date _____ Time _____

Date and time of error: _____

Name of person administering medication: _____

Name of medication and dosage prescribed: _____

DESCRIBE CIRCUMSTANCES LEADING TO ERROR: _____

DESCRIBE ACTION TAKEN: _____

REACTIONS: _____

PERSONS NOTIFIED OF ERROR:

Principal _____

Physician _____

School Nurse _____

Parent _____

Poison Control 1-800-722-5725 _____

Name of person completing incident report: _____

Follow-up of information, if applicable: _____

Principal's Signature _____